

2012 PUBLIC-USE DATA FILE

USER MANUAL

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UTAH DEPARTMENT OF HEALTH

Joint Release by

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INTRODUCTION

Utah Emergency Department Encounter Database Administrative Rule R426-1-7 (I) mandates all Utah licensed hospitals to report

information on emergency department patient encounters. The rule defines the data elements which hospitals are required to submit to the Bureau of Emergency Medical Services under statute and administrative rules specifically for the purpose of constructing a statewide Emergency Department Encounter Database. The database contains the consolidated information on complete billing, medical codes, personal characteristics describing a patient, services received, and charges billed for each patient emergency department (ED) encounter. The ED Encounter Public Data Set includes the combined data on all ED outpatient visits and ED inpatient admissions. A new field Encounter Type with values of 'o' and 'i' has been added to the record layout starting in 1999. Caution should be used when comparing this data with previous years as they only included ED outpatient visits.

Forty three eligible hospitals submitted data in every calendar quarter (3-month period) in 2012. Lone Peak Emergency Center, a new satellite emergency department affiliated with St. Mark's Hospital, opened on May 25th, 2010. **UHC Daybreak Health Center ER, a new satellite emergency department affiliated with the University of Utah, started reporting in 2012.** DRG and APR-DRG (v. 20.0+) fields including patient severity subclass and risk of mortality have been added starting in 2005. Because of the dramatic change moving from DRG (V24) to MS-DRG (V25) which went into effect on 10/1/2007, we are including both fields as separate data elements ran across the entire year for 2012. **Due to internal processing issues the 2012 data set is being released with Quarter 2, 3 and 4 missing for Uinta Basin Medical Center.** If this data becomes available after the initial release, a subsequent file will be sent at that point.

Public-Use Data Files (PDF)

Public-Use Data Files are designed to provide general health care information to a wide spectrum of users with minimal controls. The Director of the Bureau of Emergency Medical Services or the Director of the Office of Health Care Statistics can approve a request for a PDF without further review.

Two different public data files are available for 2012 Emergency Department Encounter Data (see page 4 for data elements and file descriptions).

Data Processing and Quality

<u>Data submission</u>: The Office of Health Care Statistics provides data element definitions to ensure all hospitals will report similar data. The Bureau of Emergency Medical Services/Office of Health care Statistics receives quarterly Emergency Department Encounter Data from hospitals in various formats and media. The data are converted into a standardized format.

System Edits: The data are validated through a process of automated editing and report verification. Each record is subjected to a series of edits that check for accuracy, consistency, completeness, and conformity with the definitions specified in the Utah Hospital Emergency Patient Encounter Data Submittal Manual. Records failing the edit check are returned to the data supplier for correction or comment.

<u>Hospital Reviews</u>: Each hospital is provided with a 35-day review period to validate the compiled data against their hospital records. Any inconsistencies discovered by the hospitals are reevaluated or corrected.

<u>Missing Values</u>: When dealing with unknown values, it is important to distinguish between <u>systematic</u> omission by hospitals, i.e., reporting exemption granted for particular data elements, coding problems that deemed the entire data from the hospital

as unusable; and <u>non-systematic</u> omission, i.e., coding problems, invalid codes, etc. While systematic omission creates potential bias, non-systematic omission is assumed to occur randomly. The user is advised to examine missing values by hospitals for each data element to be used.

Patient Confidentiality

The Committee has taken considerable efforts to ensure that no individual patient could be identified from the PDF. Patient's age and payers are grouped. The data elements for the following specific conditions are concealed by coding them at the state level: (1) Utah zip codes where there are less than 30 ED encounters per year are coded as the county abbreviation, and out-of-state zip codes where there are less than 30 ED encounters are coded as the state abbreviation, (2) age groups, sex and zip code are encrypted as 66, E, and -6666, respectively, if the patient's Major Diagnosis Code (MDC) is 25 "Human Immunodeficiency Virus Infection" or if the Diagnosis Related Group (DRG) is 433, 521-523 "Alcohol/Drug Abuse or Dependence".

Agreement to Protect Patient Confidentiality

The data collected by the Utah Department of Health may be used only for the purpose of health statistical reporting and analysis or as specified in the user's written request for the data. Any effort to determine the identity of any reported case or any attempt to link this data set with individually identifiable records is prohibited.

Uses of Emergency Department Data

The PDF includes data on charges and length of stay in hours (LOSH). Several factors affect the comparability of charge and LOSH across hospitals, such as case-mix and severity complexity, payer-mix, market areas and hospital ownership, affiliation or teaching status. Any analysis of charge or LOSH at the hospital level should consider the above factors.

Data Format

Fixed ASCII is the standard format for the public data file, on a CD-ROM. Requests for other formats, such as a SAS Dataset, will be considered.

Citation

Any statistical reporting or analysis based on the data shall cite the source as the following:

Utah Emergency Department Encounter Data (2012). Bureau of Emergency Medical Services/Office of Health Care Statistics. Utah Department of Health. Salt Lake City, Utah. 2014.

DRG, MS-DRG and APR-DRG Classification:

The DRG, MS-DRG and APR-DRG fields in the data were generated using:

3M Core Grouping Software for Windows (**Version 2013.2.4**). Wallingford CT, 3M Health Information Systems, **July 2013.**

Specifically, for the APR-DRG, and for the 2012 data, the Core Grouping Software executed the following module:

APR-DRG Grouper(**Versions 29.0 & 30.0**), Wallingford CT, 3M Health Information Systems, October 2011 & October 2012.

The DRG is the original HCFA defined DRG. For all of the 2012 data, the Core Grouping Software generated this using the following module: CMS Grouper(Version 24.0), Wallingford CT, 3M Information Systems, October 2006.

The MS-DRG is the new HCFA defined DRG starting with V25.0. For all of the 2012 data, the Core Grouping Software generated this using the following modules:

CMS Grouper(Version 29.0 & 30.0), Wallingford CT, 3M Information Systems, October 2011 and October 2012.

Redistribution

User shall not redistribute the Utah Emergency Department Encounter Data File in its original format. User shall not redistribute any data products derived from the file without written permission from the Bureau of Emergency Medical Services or Office of Health Care Statistics, Utah Department of Health.

FILE LAYOUT

RECORD LAYOUT OF EMERGENCY DEPARTMENT ENCOUNTER PUBLIC USE DATA FILE I (2012.1)

	T OBLIC O				I EVANDIE	I Da
	DATA ELEMENT	TYPE*	WIDTH	POSITION**	EXAMPLE	Pg
				From To	VALUES	
1	Provider identifier (hospital)	Char	3 3	1 - 3	101, 102,	8
2	Patient's age (in categories)	Num		4 - 6	0,1,,21	9
3	Patient's gender	Char	1	7 - 7	M,F	9
4	Source of adm./ Point of Origin					
	Non-newborns	Char	1	8 - 8	0,1,	9
	Newborns	Char	1	9 - 9	D 1	۱ŏ
5	Length of stay in hours	Num		10 - 17	D,1, D,1,	10
6	Patient's discharge status	Char	0	18 - 19	01,02,	10
7			2		84000, AZ	
1 ′	Patient's postal zip code	Char	5	20 - 24	04000, AZ	11
8	Patient's residential county	Num	8 2 5 3 1	25 - 27	1,2,	13
9	Patient cross-county migration	Char		28 - 28	Y,N	13
10	Patient's marital status	Char	1	29 - 29	S,M,	13
11	Patient's race and ethnicity	Char	2	30 - 31	Ŵ,ŴH,	14
12 13	Principal diagnosis code	Char	5	32 - 36	8180,81513	14
13	Secondary diagnosis code 1	Char	5	37 - 41	8180,81513	14
14	Secondary diagnosis code 2	Char	5	42 - 46	8180,81513	14
15	Secondary diagnosis code 3	Char	5	47 - 51	8180,81513	14
16	Secondary diagnosis code 4	Char	5	52 - 56	8180,81513	14
17	Principal procedure	Char	2555554	57 - 60	480,9711	14
18	Secondary procedure 1	Char	4	61 - 64	480,9711	14
10			4	65 - 68		
19	Secondary procedure 2	Char	4 5 2		480,9711	14
20	External cause code (E-code)	Char	5	69 - 73	E8119	33
21	Admission hour	Num	2	74 - 75	00,01,	33
22	Total charge_	Num	10	76 - 85	498.68	31
23	Emergency Department charge	Num	10	86 - 95	498.68	31
24	Primary payer category	Char	2	96 - 97	01,02,	31 31
25	Secondary payer category	Char	2	98 - 99	01,02,	31
26	Third payer category	Char	2	100 - 101	01,02,	31
27	Patient's relationship to insured	Num	3	102 - 104	1,2,	31
28	Outlier, total charge	Num	2 2 2 3 3 3 1	105 - 107		32
59	Outlier, length of stay in hours	Num	3	108 - 110	D,1 D,1	32 32
30	Encounter quarter	Char	1	111 - 111	1,2,3,4	32
31	< blank >	Onlai	ģ	112 - 119	1,2,0,4	72
32	Secondary diagnosis code 5	Char	5	120 - 124	8180,81513	14
33	Secondary diagnosis code 6	Char	5	125 - 129	B180,81513	14
0.0		Char	5	130 - 134	B180,81513	14
04	Secondary diagnosis code 7		855554	130 - 134		
35	Secondary diagnosis code 8	Char	5	135 - 139	8180,81513	14
36	Secondary procedure code 3	Char		140 - 143	480,9711	14
19 20 21 22 22 24 25 26 27 28 29 30 31 32 33 33 33 33 33 33 33 33 33 33 33 33	Secondary procedure code 4	Char	4	144 - 147	480,9711	14
38	Secondary procedure code 5	Char	4 2 3	148 - 151	480,9711	14
39	Major diagnostic category (MDC)	Num	2	152 - 153	0,1,25	30
40	Principal diagnostic category	Num	3	154 - 156	D,1,	32
41	Encounter Type	Char	1	157 - 157	0,1, p,i	32
42	Record ID number	Num	10	158 - 167	3100216719	32
43	DRG	Num	3	168 - 170	1 - 579	32 32 15
44	Patient severity subclass value	Char	1	171 - 171	0 - 4	33
45	Patient risk of mortality value	Char	1	172 - 172	D - 4	33 33
16	APR - DRG	Num	3	173 - 175	1 - 956	34
41 42 43 44 45 46 47	MS - DRG	Num	3 7	173 - 173 176 - 178	1 - 999	40
48			3 2			54
+0	MS - MDC	Num		179 - 180	0,1,25	ρ4

^{*}Variable Type (if data requested is SAS Dataset): Char=Character, Num=Numeric **Column position (if data requested is ASCII file)

RECORD LAYOUT OF EMERGENCY DEPARTMENT ENCOUNTER PUBLIC USE DATA FILE III (2012.3)

	DATA ELEMENT	TYPE*	WIDTH	POSITION**	EXAMPLE	Pg
				From To	VALUES	
1	Provider identifier (hospital)	Char	3	1 - 3	101, 102,	8
2	Patient's age (in categories)	Num	3	4 - 6	0,1,,21	9
3	Patient's gender	Char	1	7 - 7	M,F	9
4	Length of stay in hours	Num	8	8 - 15	0,1,	10
5	Patient's discharge status	Char	2	16 - 17	0,1,	10
6	Patient's residential county	Num	2 3 5	18 - 20	1,2,	13
7	Principal diagnosis code	Char	5	21 - 25	8180,81513	14
8	Principal procedure	Char	4	26 - 29	480,9711	14
9	Secondary procedure 1	Char	4	30 - 33	480,9711	14
10	Secondary procedure 2	Char	4	34 - 37	480,9711	14
11	External cause code (E-code)	Char	5	38 - 42	E8119	33
	Admission hour `	Num	2	43 - 44	00,01,	33
13	Total charge	Num	10	45 - 54	498.68	31
14	Emergency Department charge	Num	10	55 - 64	498.68	31
	Primary payer category	Char		65 - 66	01,02,	31
16	< blank >		2 8	67 - 74	, , ,	
	Principal diagnostic category	Num	3	75 - 77	0,1,	32
18	Encounter Type	Char	1	78 - 78	b,i	32
	Record ID number	Num	10	79 - 88	3100216719	32

^{*}Variable Type (if data requested is SAS Dataset): Char=Character, Num=Numeric **Column position (if data requested is ASCII file)

DESCRIPTION OF DATA ELEMENTS

Provider Identifier: (see Appendix A for hospital characteristics) Hospital from which patient was released.

724 = LONE PEAK EMERGENCY CENTER (ER-OUT ONLY)

101 = BEAVER VALLEY HOSPITAL 102 = MILFORD VALLEY MEMORIAL HOSPITAL - CAH 103 = BRIGHAM CITY COMMUNITY HOSPITAL 104 = BEAR RIVER VALLEY HOSPITAL 105 = LOGAN REGIONAL HOSPITAL 106 = CASTLEVIEW HOSPITAL 107 = LAKEVIEW HOSPITAL 108 = DAVIS HOSPITAL & MEDICAL CENTER 109 = UINTAH BASIN MEDICAL CENTER 110 = GARFIELD MEMORIAL HOSPITAL AND CLINICS 111 = ALLEN MEMORIAL HOSPITAL – CAH 112 = VALLEY VIEW MEDICAL CENTER 113 = CENTRAL VALLEY MEDICAL CENTER - CAH 114 = KANE COUNTY HOSPITAL 115 = FILLMORE COMMUNITY MEDICAL CENTER - CAH 116 = DELTA COMMUNITY MEDICAL CENTER - CAH 117 = JORDAN VALLEY HOSPITAL 118 = ALTA VIEW HOSPITAL 119 = COTTONWOOD HOSPITAL MEDICAL CENTER (Closed--Data through 3rd Qtr 2007) 120 = SALT LAKE REGIONAL MEDICAL CENTER 121 = LDS HOSPITAL 122 = PRIMARY CHILDREN'S MEDICAL CENTER 124 = ST. MARK'S HOSPITAL 125 = UHC UNIVERSITY OF UTAH HOSPITALS & CLINICS 126 = PIONEER VALLEY HOSPITAL 128 = SAN JUAN HOSPITAL - CAH 129 = GUNNISON VALLEY HOSPITAL - CAH 130 = SANPETE VALLEY HOSPITAL - CAH 132 = SEVIER VALLEY HOSPITAL 133 = MOUNTAIN WEST MEDICAL CENTER 134 = ASHLEY VALLEY MEDICAL CENTER 135 = OREM COMMUNITY HOSPITAL 136 = AMERICAN FORK HOSPITAL 137 = MOUNTAIN VIEW HOSPITAL 138 = UTAH VALLEY REGIONAL MEDICAL CENTER 139 = HEBER VALLEY MEDICAL CENTER - CAH 140 = DIXIE REGIONAL MEDICAL CENTER 141 = MCKAY-DEE HOSPITAL CENTER 142 = OGDEN REGIONAL MEDICAL CENTER 144 = TIMPANOGOS REGIONAL HOSPITAL 145 = CACHE VALLEY SPECIALTY HOSPITAL (ER-OUT ONLY) 146 = INTERMOUNTAIN MEDICAL CENTER 147 = PARK CITY MEDICAL CENTER 148 = RIVERTON HOSPITAL 307 = THE ORTHOPEDIC SPECIALTY HOSPITAL (2003 ER-INP ONLY) 310 = UHC HUNTSMAN CANCER HOSPITAL (ER-INP ONLY) 502 = UHC DAYBREAK HEALTH CENTER ER (ER-OUT ONLY)

Patient's Age (as of last birthday) at the Date of Release

0 = 1 - 28 days

1 = 29 - 365 days

2 = 1 - 4 years

3 = 5 - 9

4 = 10 - 14

5 = 15 - 17

6 = 18 - 19

7 = 20 - 24

8 = 25 - 29

9 = 30 - 34

10 = 35 - 39

11 = 40 - 44

12 = 45 - 49

13 = 50 - 54

14 = 55 - 59

15 = 60 - 64

16 = 65 - 69

17 = 70 - 74

18 = 75 - 79

19 = 80 - 84

20 = 85 - 89

21 = 90 +

66 = Encrypted (confidential data)

99 = Unknown

Blank = Not reported

Patient's Gender

M = Male

F = Female

U = Unknown

E = Encrypted (confidential data)

Blank = Not reported

Source of Admission/Point of Origin for Non-Newborns

0 = Newborns

1 = Physician Referral

The patient was admitted to this facility upon the recommendation of his or her personal physician. (See code 3 if the physician has an HMO affiliation.)

2 = Clinic Referral

The patient was admitted to this facility upon recommendation of this facility's clinic physician. 3 = HMO referral

The patient was admitted to this facility upon the recommendation of a health maintenance organization (HMO) physician.

4 = Transfer from a hospital

The patient was admitted to this facility as a transfer from an acute care facility where he or she was an inpatient.

5 = Transfer from a skilled nursing facility

The patient was admitted to this facility as a transfer from a skilled nursing facility where he or she was an inpatient.

6 = Transfer from another health care facility

The patient was admitted to this facility as a transfer from a health care facility other than an acute care facility or skilled nursing facility.

7 = Emergency Department (Not a valid code since July 2010)

The patient was admitted to this facility upon the recommendation of this facility's Emergency Department physician.

8 = Court/Law enforcement

The patient was admitted to this facility upon the direction of a court of law, or upon the request of a law enforcement agency representative.

9 = Information not available

The means by which the patient was admitted to this hospital is not known.

A = Transfer from a critical access hospital

B = Transfer from another HHA

C = Readmission to same HHA

D = Transfer from hospital inpatient in same facility

E = Transfer from Ambulatory Surgery Center

F = Transfer from Hospice and is Under a Hospice Plan of Care or Enrolled in a Hospice Program

Blank = Not reported

Source of Admission/Point of Origin for Newborns

0 = Non newborns

1 = Normal delivery

A baby delivered without complications.

2 = Premature delivery

A baby delivered with time or weight factors qualifying it for premature status.

3 = Sick baby

A baby delivered with medical complications, other than those relating to premature status.

4 = Extramural birth

A baby born in a non-sterile environment.

5 = Born inside this hospital (starting Q4 07)

6 = Born outside this hospital (starting Q4 07)

9 = Information not available.

Blank = Not reported

Length of Stay in hours

Total hours stayed in hospital from the hour of admission to the hour of release.

Blank = Not reported

Patient's Discharge Status

01 = Release to home or self care, routine release

02 = Released/transferred to another short-term general

03 = Released/transferred to skilled nursing facility

04 = Released/transferred to an intermediate care facility

05 = Released/transferred to another type of

institution; starting 04/01/08, pediatric or cancer hospital

06 = Released/transferred to home under care of organized home health service organization

07 = Left against medical advice

08 = Released/transferred to home under care of a home IV provider

20 = Expired

21 = Released/transferred to Court/Law Enforcement

40 = Expired at home

41 = Expired in a medical facility; i.e. hospital, skilled nursing facility, intermediate care facility, or free standing hospice

42 = Expired - place unknown

43 = Discharged to federal facility

50 = Discharged/transferred to hospice - home

51 = Discharged/transferred to hospice - medical facility

61 = Discharged/transferred within institution to hospital based medicare swing bed

62 = Discharged/transferred to another rehab facility including distinct part units in hospital

63 = Discharged/transferred to a long term care hospital

64 = Discharged/transferred to a nursing facility certified under medicaid but not certified under medicare

65 = Discharged/transferred to a psychiatric facility

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66 = Discharged/transferred to a Critical Access Hospital
               70 = Discharged/transferred/referred to another
                       institution not defined elsewhere in this code list starting 04/01/08
               71 = Discharged/transferred/referred to another
                       institution for outpatient (as per plan of care)
               72 = Discharged/transferred to this institution
                       for outpatient services(as per plan of care)
               09 = Unknown
            Blank = Not reported
Patient's Residential Postal Zip Code
        84000-84799 = Zip codes in Utah
               -4444 = Homeless (word homeless or homeless code of ZZZZZ given as
                                                                                     address)
               -5555 = Unknown Utah (Unknown/invalid zip code with Utah address)
                       (Note: If the city is present in the address but the zip code is not, the zip code variable is
                       coded as -5555 while the county variable is coded with the actual county identifier)
               -6666 = Encrypted (confidential data)
               -8888 = Unknown (completely missing address information)
               -9999 = Outside U.S.A. (foreign address)
               Helpful Hint: A quick way to identify the city associated with a
               zip code is to use the United States Postal Service website:
               http://www.usps.gov/ncsc/lookups/lookup_ctystzip.html
        If less than 30 encounters occurred for a Utah zip code area, this zip code was mapped into the
        county code:
            Beave = Beaver
            BoxEl = Box Elder
            Cache = Cache
            Carbo = Carbon
            Dagge = Daggett
            Davis = Davis
            Duche = Duchesne
            Emery = Emery
            Garfi = Garfield
            Iron = Iron
            Milla = Millard
            Morga = Morgan
            MulCo = Multi county
            Piute = Piute
            Rich = Rich
            SaltL = Salt Lake
            SanJu = San Juan
            Sanpe = Sanpete
            Sevie = Sevier
            Summi = Summit
            Tooel = Tooele
            Uinta = Uintah
            Washi = Washington
            Wayne = Wayne
            Weber = Weber
        If less than 30 encounters occurred for a non-Utah zip code area, this zip code was mapped into the
       state code:
           AL = ALABAMA
           AK = ALASKA
           AZ = ARIZONA
           AR = ARKANSAS
           CA = CALIFORNIA
           CO = COLORADO
           CT = CONNECTICUT
           DE = DELAWARE
           DC = DISTRICT OF COLUMBIA
           FL = FLORIDA
```

GA = GEORGIA HI = HAWAII ID = IDAHO

IL = ILLINOIS

IN = INDIANA

IA = IOWA

KS = KANSAS

KY = KENTUCKY

LA = LOUISIANA

ME = MAINE

MD = MARYLAND

MA = MASSACHUSETTS

MI = MICHIGAN

MN = MINNESOTA

MS = MISSISSIPPI

MO = MISSOURI

MT = MONTANA

NE = NEBRASKA

NV = NEVADA

NH = NEW HAMPSHIRE

NJ = NEW JERSEY

NM = NEW MEXICO

NY = NEW YORK

NC = NORTH CAROLINA

ND = NORTH DAKOTA

OH = OHIO

OK = OKLAHOMA

OR = OREGON

PA = PENNSYLVANIA

RI = RHODE ISLAND

SC = SOUTH CAROLINA

SD = SOUTH DAKOTA

TN = TENNESSEE

TX = TEXAS

UT = UTAH

VT = VERMONT

VA = VIRGINIA

WA = WASHINGTON

WV = WEST VIRGINIA

WI = WISCONSIN

WY = WYOMING

PR = PUERTO RICO

GU = GUAM

Patient's Residential County

1= Box Elder

2= Cache

3= Rich

4= Morgan

5= Weber

6= Davis

7= Salt Lake

8= Summit

9= Tooele

10= Utah

11= Wasatch

12= Daggett

13= Duchesne

14= Uintah

15= Juab

16= Millard

18= Sanpete

17= Piute

19= Sevier

20= Wayne

```
21= Carbon
22= Emery
23= Grand
24= San Juan
25= Beaver
26= Garfield
27 = Iron
28= Kane
29= Washington
30= Multi-County (used in earlier versions of Dataset--the
   category has been eliminated)
44= Homeless (word homeless or homeless code of ZZZZZ given as
   address)
55= Unknown Utah (unknown city & zip but Utah in address)
77= Outside Utah (but in U.S.A.)
88= Unknown (completely missing address information)
99= Outside U.S.A. (foreign address)
```

Patient's Cross-County Migrant Status (hospital in different county than

patient residence)

Y = Yes (includes out-of-state, foreign, out-of-county, homeless)

N = No (from same county)

U = Unknown (includes unknown and unknown but Utah residence)

Patient's Marital Status

S = Single

M = Married

X = Legally Separated

D = Divorced

W = Widowed

U = Unknown

P = Life Partner

Blank = Not reported

Patient's Race and Ethnicity

W = White, non-Hispanic origin
WH = White, Hispanic origin
NW = Non-white, Hispanic origin
NH = Non-white, non-Hispanic origin
UK = Unknown
Blank = Not reported

Principal Diagnosis Code

The first four digits of ICD-9-CM code. Refer to International Classification of Diseases (9th Revision): Clinical Modification for description.

There is an "implied" decimal point between the 3rd and 4th digit (decimal point is part of ICD-9-CM code but has been stripped out of data).

Blank = Not reported

ICD-9-CM E-Codes and V-Codes might also be found in this field.

The ICD-9-CM diagnosis codes, as well as the E-Codes and V-Codes can be looked up on the Internet at Yaki Technologies' Website www.eicd.com/eicdmain.htm.

Secondary Diagnosis Code 1 ... Secondary Diagnosis Code 8

Definition and category are the same as the Principal Diagnosis Code.

Principal Procedure Code

The four digits of ICD-9-CM code. Refer to International Classification of Diseases (9th Revision): Clinical Modification for description.

There is an "implied" decimal point between the 2nd and 3rd digit (decimal point is part of ICD-9-CM code but has been stripped out of data).

Blank = Not reported

Secondary Procedure Code 1 ... Secondary Procedure Code 5

Definition and category are the same as Principal Procedure Code.

- 1* CRANIOTOMY AGE >17 EXCEPT FOR TRAUMA (prior to 10-1-02)
- 1* CRANIOTOMY AGE >17 WITH COMPLICATIONS, COMORBIDITIES (beginning 10-1-02)
- 2* CRANIOTOMY FOR TRAUMA AGE >17 (prior to 10-1-02)
- 2* CRANIOTOMY AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES (beginning 10-1-02)
- 3 CRANIOTOMY AGE 0-17
- 4* SPINAL PROCEDURES (prior to 10-1-03; no DRG 4 beginning 10-1-03 when DRGs 531-532 were added)
- 5* EXTRACRANIAL VASCULAR PROCEDURES (prior to 10-1-03; no DRG 5 beginning 10-1-03 when DRGs 533-534 were added)
- 6 CARPAL TUNNEL RELEASE
- 7 PERIPHERAL & CRANIAL NERVE & OTHER NERVE SYSTEM PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
- 8 PERIPHERAL & CRANIAL NERVE & OTHER NERVE SYSTEM PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
- 9 SPINAL DISORDERS & INJURIES
- 10 NERVOUS SYSTEM NEOPLASMS WITH COMPLICATIONS, COMORBIDITIES
- 11 NERVOUS SYSTEM NEOPLASMS WITHOUT COMPLICATIONS, COMORBIDITIES
- 12 DEGENERATIVE NERVOUS SYSTEM DISORDERS
- 13 MULTIPLE SCLEROSIS & CEREBELLAR ATAXIA
- 14* SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TRANSIENT ISCHEMIC ATTACK (prior to 10-1-02)
- 14* INTRA CRANIAL HEMORRHAGE AND STROKE WITH INFARCTION (beginning 10-1-02, used to 10-1-04)
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- 305 KIDNEY, URETER & MAJOR BLADDER PROCEDURES FOR NON-NEOPLASM WITHOUT COMPLICATIONS, COMORBIDITIES
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- 307 PROSTATECTOMY WITHOUT COMPLICATIONS, COMORBIDITIES
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- 330 URETHRAL STRICTURE AGE 0-17
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- 355 UTERINE, ADNEXA PROCEDURES FOR NON-OVARIAN/ADNEXAL MALIGNANCY WITHOUT COMPLICATIONS, COMORBIDITIES
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- 376 POSTPARTUM & POST ABORTION DIAGNOSES WITHOUT OPERATING ROOM PROCEDURE
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- 379 THREATENED ABORTION
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- 383 OTHER ANTEPARTUM DIAGNOSES WITH MEDICAL COMPLICATIONS
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- 385 NEONATES, DIED OR TRANSFERRED TO ANOTHER ACUTE CARE FACILITY
- 386 EXTREME IMMATURITY OR RESPIRATORY DISTRESS SYNDROME, NEONATE
- 387 PREMATURITY WITH MAJOR PROBLEMS
- 388 PREMATURITY WITHOUT MAJOR PROBLEMS
- 389 FULL TERM NEONATE WITH MAJOR PROBLEMS
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- 391 NORMAL NEWBORN
- 392 SPLENECTOMY AGE >17
- 393 SPLENECTOMY AGE 0-17
- 394 OTHER OPERATING ROOM PROCEDURES OF THE BLOOD AND BLOOD FORMING ORGANS
- 395 RED BLOOD CELL DISORDERS AGE >17
- 396 RED BLOOD CELL DISORDERS AGE 0-17
- 397 COAGULATION DISORDERS
- 398 RETICULOENDOTHELIAL & IMMUNITY DISORDERS WITH COMPLICATIONS, COMORBIDITIES
- 399 RETICULOENDOTHELIAL & IMMUNITY DISORDERS WITHOUT COMPLICATIONS, COMORBIDITIES
- 400* LYMPHOMA & LEUKEMIA WITH MAJOR OPERATING ROOM PROCEDURE (prior to 10-1-03; no DRG 400 beginning 10-1-03 when DRGs 539-540 were added)
- 401 LYMPHOMA & NON-ACUTE LEUKEMIA WITH OTHER OPERATING ROOM PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
- 402 LYMPHOMA & NON-ACUTE LEUKEMIA WITH OTHER OPERATING ROOM PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
- 403 LYMPHOMA & NON-ACUTE LEUKEMIA WITH COMPLICATIONS, COMORBIDITIES
- 404 LYMPHOMA & NON-ACUTE LEUKEMIA WITHOUT COMPLICATIONS, COMORBIDITIES
- 405 ACUTE LEUKEMIA WITHOUT MAJOR OPERATING ROOM PROCEDURE AGE 0-17
- 406 MYELOPROLIFERATIVE DISORDER OR POORLY DIFFUSED NEOPLASMS WITH MAJOR OPERATING ROOM PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
- 407 MYELOPROLIFERATIVE DISORDER OR POORLY DIFFUSED NEOPLASMS WITH MAJOR OPERATING ROOM PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
- 408 MYELOPROLIFERATIVE DISORDER OR POORLY DIFFUSED NEOPLASMS WITH OTHER OPERATING ROOM PROCEDURES
- 409 RADIOTHERAPY
- 410 CHEMOTHERAPY WITHOUT ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS
- 411 HISTORY OF MALIGNANCY WITHOUT ENDOSCOPY
- 412 HISTORY OF MALIGNANCY WITH ENDOSCOPY
- 413 OTHER MYELOPROLIFERATIVE DISEASES OR POORLY DIFFUSED NEOPLASM DIAGNOSES WITH COMPLICATIONS, COMORBIDITIES
- 414 OTHER MYELOPROLIFERATIVE DISEASES OR POORLY DIFFUSED NEOPLASM DIAGNOSES WITHOUT COMPLICATIONS, COMORBIDITIES
- 415* OPERATING ROOM PROCEDURE FOR INFECTIOUS & PARASITIC DISEASES (prior to 10-1-06)
- 416* SEPTICEMIA AGE >17 (prior to 10-1-06)
- 417 SEPTICEMIA AGE 0-17

- 418 POSTOPERATIVE & POST-TRAUMATIC INFECTIONS
- 419 FEVER OF UNKNOWN ORIGIN AGE >17 WITH COMPLICATIONS, COMORBIDITIES
- 420 FEVER OF UNKNOWN ORIGIN AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
- 421 VIRAL ILLNESS AGE >17
- 422 VIRAL ILLNESS & FEVER OF UNKNOWN ORIGIN AGE 0-17
- 423 OTHER INFECTIOUS & PARASITIC DISEASES DIAGNOSES
- 424 OPERATING ROOM PROCEDURE WITH PRINCIPAL DIAGNOSES OF MENTAL ILLNESS
- 425* ACUTE ADJUSTMENT REACTIONS & DISTURBANCES OF PSYCHOSOCIAL DYSFUNCTION (prior to 10/01/99)
- 425* ACUTE ADJUSTMENT REACTION & PSYCHOSOCIAL DYSFUNCTION (beginning 10/01/99)
- 426 DEPRESSIVE NEUROSES
- 427 NEUROSES EXCEPT DEPRESSIVE
- 428 DISORDERS OF PERSONALITY & IMPULSE CONTROL
- 429 ORGANIC DISTURBANCES & MENTAL RETARDATION
- 430 PSYCHOSES
- 431 CHILDHOOD MENTAL DISORDERS
- 432 OTHER MENTAL DISORDER DIAGNOSES
- 433 ALCOHOL/DRUG ABUSE OR DEPENDENCE, LEFT AGAINST MEDICAL ADVICE
- 434* ALCOHOL/DRUG ABUSE OR DEPENDENCE, DETOXIFICATION OR OTHER SYMPTOM TREATMENT WITH COMPLICATIONS, COMORBIDITIES (prior to 10-1-01; no DRG 434 beginning 10-1-01 when DRGs 521-523 were added)
- 435* ALCOHOL/DRUG ABUSE OR DEPENDENCE, DETOXIFICATION OR OTHER SYMPTOM TREATMENT WITHOUT COMPLICATIONS, COMORBIDITIES (prior to 10-1-01; no DRG 435 beginning 10-1-01 when DRGs 521-523 were added)
- 436* ALCOHOL/DRUG DEPENDENCE WITH REHABILITATION THERAPY (prior to 10-1-01; no DRG 436 beginning 10-1-01 when DRGs 521-523 were added)
- 437* ALCOHOL/DRUG DEPENDENCE, COMBINED REHABILITATION & DETOXIFICATION THERAPY (prior to 10-1-01; no DRG 437 beginning 10-1-01 when DRGs 521-523 were added)
- 439 SKIN GRAFTS FOR INJURIES
- 440 WOUND DEBRIDEMENTS FOR INJURIES
- 441 HAND PROCEDURES FOR INJURIES
- 442 OTHER OPERATING ROOM PROCEDURES FOR INJURIES WITH COMPLICATIONS, COMORBIDITIES
- OTHER OPERATING ROOM PROCEDURES FOR INJURIES WITHOUT COMPLICATIONS, COMORBIDITIES
- 444 TRAUMATIC INJURY AGE >17 WITH COMPLICATIONS, COMORBIDITIES
- 445 TRAUMATIC INJURY AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
- 446 TRAUMATIC INJURY AGE 0-17
- 447 ALLERGIC REACTIONS AGE >17
- 448 ALLERGIC REACTIONS AGE 0-17
- 449 POISONING & TOXIC EFFECTS OF DRUGS AGE >17 WITH COMPLICATIONS, COMORBIDITIES
- 450 POISONING & TOXIC EFFECTS OF DRUGS AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
- 451 POISONING & TOXIC EFFECTS OF DRUGS AGE 0-17
- 452 COMPLICATIONS OF TREATMENT WITH COMPLICATIONS, COMORBIDITIES
- 453 COMPLICATIONS OF TREATMENT WITHOUT COMPLICATIONS, COMORBIDITIES
- 454 OTHER INJURY, POISONING & TOXIC EFFECT DIAGNOSES WITH COMPLICATIONS, COMORBIDITIES
- 455 OTHER INJURY, POISONING & TOXIC EFFECT DIAGNOSES WITHOUT COMPLICATIONS, COMORBIDITIES
- 456* BURNS, TRANSFERRED TO ANOTHER ACUTE CARE FACILITY (prior to 10-1-98; no DRG 456 beginning 10-1-98 when DRGs 504-511 were added)
- 457* EXTENSIVE BURNS WITHOUT OPERATING ROOM PROCEDURE (prior to 10-1-98; no DRG 457 beginning 10-1-98 when DRGs 504-511 were added)
- 458* NON-EXTENSIVE BURNS WITH SKIN GRAFT (prior to 10-1-98; no DRG 458 beginning 10-1-98 when DRGs 504-511 were added)
- 459* NON-EXTENSIVE BURNS WITH WOUND DEBRIDEMENT OR OTHER OPERATING ROOM PROCEDURE (prior to 10-1-98; no DRG 459 beginning 10-1-98 when DRGs 504-511 were added)
- 460* NON-EXTENSIVE BURNS WITHOUT OPERATING ROOM PROCEDURE (prior to 10-1-98; no DRG 460 beginning 10-1-98 when DRGs 504-511 were added)
- 461 OPERATING ROOM PROCEDURE WITH DIAGNOSES OF OTHER CONTACT WITH HEALTH SERVICES

- 462 REHABILITATION
- 463 SIGNS & SYMPTOMS WITH COMPLICATIONS, COMORBIDITIES
- 464 SIGNS & SYMPTOMS WITHOUT COMPLICATIONS, COMORBIDITIES
- AFTERCARE WITH HISTORY OF MALIGNANCY AS SECONDARY DIAGNOSIS
- 466 AFTERCARE WITHOUT HISTORY OF MALIGNANCY AS SECONDARY DIAGNOSIS
- 467 OTHER FACTORS INFLUENCING HEALTH STATUS
- 468 EXTENSIVE OPERATING ROOM PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS
- 469 PRINCIPAL DIAGNOSIS INVALID AS DISCHARGE DIAGNOSIS
- 470 UNGROUPABLE
- BILATERAL OR MULTIPLE MAJOR JOINT PROCEDURES OF LOWER EXTREMITY 471
- 472* EXTENSIVE BURNS WITH OPERATING ROOM PROCEDURE (prior to 10-1-98; no DRG 472 beginning 10-1-05 when DRG 553 was added)
- 473 ACUTE LEUKEMIA WITHOUT MAJOR OPERATING ROOM PROCEDURE AGE >17
- 475* RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT (prior to 10-1-06)
- 476 PROSTATIC OPERATING ROOM PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS
- 477 NON-EXTENSIVE OPERATING ROOM PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS
- OTHER VASCULAR PROCEDURES WITH COMPLICATIONS, CORMORBIDITIES (prior to 10-478* 1-05; no DRG 478 beginning 10-1-05 when DRGs 553-554 were added)
- 479 OTHER VASCULAR PROCEDURES WITHOUT COMPLICATIONS, CORMORBIDITIES
- 480* LIVER TRANSPLANT (prior to 10-1-04)
- LIVER TRANSPLANT AND/OR INTENSTINAL TRANSPLANT (beginning 10-1-04)
- 481 BONE MARROW TRANSPLANT
- 482 TRACHEOSTOMY FOR FACE, MOUTH & NECK DIAGNOSES
- 483* TRACHEOSTOMY EXCEPT FOR FACE, MOUTH, & NECK DIAGNOSES (prior to 10-1-02)
- 483* TRACHEOSTOMY WITH MECHANICAL VENTILATION 96+ HOURS OR PRINCIPAL DIAGNOSIS
- EXCEPT FACE, MOUTH, & NECK (beginning 10-1-02, used to 10-1-04) TRACHEOSTOMY WITH MECHANICAL VENTILATION 96+ HOURS OR PRINCIPAL DIAGNOSIS 483* EXCEPT FACE, MOUTH, AND NECK DIAGNOSES (prior to 10-1-04; no DRG 483 beginning 10-1-04 when DRGs 541-542 were added)
- CRANIOTOMY FOR MULTIPLE SIGNIFICANT TRAUMA
- 485 LIMB REATTACHMENT, HIP AND FEMUR PROCEDURE FOR MULTIPLE SIGNIFICANT TRAUMA
- 486 OTHER OPERATING ROOM PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA
- 487 OTHER MULTIPLE SIGNIFICANT TRAUMA
- 488 HIV WITH EXTENSIVE OPERATING ROOM PROCEDURE
- 489 HIV WITH MAJOR RELATED CONDITION
- 490 HIV WITH OR WITHOUT OTHER RELATED CONDITION
- MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF UPPER EXTREMITY 491
- 492* CHEMOTHERAPY W/ ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS (prior to 10-1-03) 492* CHEMOTHERAPY W/ ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS OR WITH USE OF HIGH-
- DOSE CHEMOTHERAPY AGENT (beginning 10-1-03) 493 LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT COMMON DUCT EXPLORATION WITH
- COMPLICATIONS, COMORBIDITIES LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT COMMON DUCT EXPLORATION WITHOUT 494
- COMPLICATIONS, COMORBIDITIES 495 LUNG TRANSPLANT
- 496* COMBINED ANTERIOR/POSTERIOR SPINAL FUSION (added 10-1-97)
- SPINAL FUSION WITH COMPLICATIONS AND COMORBIDITIES (between 10-1-97 and
- 497* SPINAL FUSION EXCEPT CERVICAL WITH COMPLICATIONS AND COMORBIDITIES (added 10-1-01)
- 498* SPINAL FUSION WITHOUT COMPLICATIONS AND COMORBIDITIES (between 10-1-97 and 10-1-01
- 498* SPINAL FUSION EXCEPT CERVICAL WITHOUT COMPLICATIONS AND COMORBIDITIES (added 10-1-01)
- 499* BACK & NECK PROCEDURES EXCEPT SPINAL FUSION WITH COMPLICATIONS AND COMORBIDITIES (added 10-1-97)
- 500* BACK & NECK PROCEDURES EXCEPT SPINAL FUSION WITHOUT COMPLICATIONS AND COMORBIDITIES (added 10-1-97)
- 501* KNEE PROCEDURES W PDX OF INFECTION WITH COMPLICATIONS AND COMORBIDITIES (added 10-1-97)
- 502* KNEE PROCEDURES W PDX OF INFECTION WITHOUT COMPLICATIONS AND COMORBIDITIES (added 10-1-97)
- 503* KNEE PROCEDURES WITHOUT PDX OF INFECTION (added 10-1-97)
- 504* EXTENSIVE 3rd DEGREE BURNS WITH SKIN GRAFT (added 10-1-98, used to 10-1-04)

- 504* EXTENSIVE BURNS OR FULL THICKNESS BURNS WITH MECHANICAL VENTILATION 96+ HOURS WITH SKIN GRAFT (beginning 10-1-04)
- 505* EXTENSIVE BURNS OR FULL THICKNESS BURNS WITHOUT SKIN GRAFT (added 10-1-98, used to 10-1-04)
- 505* EXTENSIVE BURNS OR FULL THICKNESS BURNS WITH MECHANICAL VENTILATION 96+ HOURS WITHOUT SKIN GRAFT (beginning 10-1-04)
- 506* FULL THICKNESS BURN WITH SKIN GRAFT OR INHALATION INJURY WITH CC OR SIGNIFICANT TRAUMA (added 10-1-98)
- 507* FULL THICKNESS BURN WITH SKIN GRAFT OR INHALATION INJURY WITHOUT CC OR SIGNIFICANT TRAUMA (added 10-1-98)
- 508* FULL THICKNESS BURN WITHOUT SKIN GRAFT OR INHALATION INJURY WITH CC OR SIGNIFICANT TRAUMA (added 10-1-98)
- 509* FULL THICKNESS BURN WITHOUT SKIN GRAFT OR INHALATION INJURY WITHOUT CC OR SIGNIFICANT TRAUMA (added 10-1-98)
- 510* NON-EXTENSIVE BURNS WITH CC OR SIGNIFICANT TRAUMA (added 10-1-98)
- 511* NON-EXTENSIVE BURNS WITHOUT CC OR SIGNIFICANT TRAUMA (added 10-1-98)
- 512* SIMULTANEOUS PANCREAS/KIDNEY TRANSPLANT (added 10-1-01)
- 513* PANCREAS TRANSPLANTS (added 10-1-01)
- 514* CARDIAC DEFIBRILLATOR IMPLANT WITH CARDIAC CATHETERIZATION (added 10-1-01; no DRG 514 beginning 10-1-03 when replaced by DRG 535-DRG 536)
- 515* CARDIAC DEFIBRILLATOR IMPLANT WITHOUT CARDIAC CATHETERIZATION (added 10-1-01)
- 516* PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITH ACUTE MYOCARDIAL INFARCTION (added 10-1-01; no DRG 516 beginning 10-1-05 when DRG 555 was added)
- 517* PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITHOUT ACUTE MYOCARDIAL INFARCTION, WITH CORONARY ARTERY STENT IMPLANT (added 10-1-01; no DRG 517 beginning 10-1-05 when DRG 556 was added)
- 518* PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITHOUT ACUTE MYOCARDIAL INFARCTION, WITHOUT CORONARY ARTERY STENT IMPLANT (added 10-1-01)
- 519* CERVICAL SPINAL FUSION WITH COMPLICATIONS AND COMORBIDITIES (added 10-1-01)
- 520* CERVICAL SPINAL FUSION WITHOUT COMPLICATIONS AND COMORBIDITIES (added 10-1-01)
- 521* ALCOHOL/DRUG ABUSE OR DEPENDENCE WITH COMPLICATIONS AND COMORBIDITIES (added 10-1-01)
- 522* ALCOHOL/DRUG ABUSE OR DEPENDENCE WITH REHABILITATION THERAPY WITHOUT COMPLICATIONS AND COMORBIDITIES (added 10-1-01)
- 523* ALCOHOL/DRUG ABUSE OR DEPENDENCE WITHOUT REHABILITATION THERAPY WITHOUT COMPLICATIONS AND COMORBIDITIES (added 10-1-01)
- 524* TRANSIENT ISCHEMIA (added 10-1-02)
- 525* HEART ASSIST SYSTEM IMPLANT (added 10-1-02, used to 10-1-04)
- 525* OTHER HEART ASSIST SYSTEM IMPLANT (beginning 10-1-04)
- 526* PERCUTANEOUS CARDIOVASCULAR PROCEDURE WITH DRUG-ELUDING STENT WITH ACUTE MYOCARDIAL INFARCTION (added 04-1-03; no DRG 526 beginning 10-1-05 when DRG 557 was added)
- 527* PERCUTANEOUS CARDIOVASCULAR PROCEDURE WITH DRUG-ELUDING STENT WITHOUT ACUTE MYOCARDIAL INFARCTION (added 04-1-03; no DRG 527 beginning 10-1-05 when DRG 558 was added)
- 528* INTRA CRANIAL VASCULAR PROCEDURE WITH PRINCIPAL DIAGNOSIS OF HEMORRHAGE (added 10-1-03)
- 529* VENTRICULAR SHUNT PROCEDURES WITH CC (added 10-1-03)
- 530* VENTRICULAR SHUNT PROCEDURES WITHOUT CC (added 10-1-03)
- 531* SPINAL PROCEDURES WITH CC (added 10-1-03)
- 532* SPINAL PROCEDURES WITHOUT CC (added 10-1-03)
- 533* EXTRACRANIAL VASCULAR PROCEDURES WITH CC (added 10-1-03)
- 534* EXTRACRANIAL VASCULAR PROCEDURES WITHOUT CC (added 10-1-03)
- 535* CARDIAC DEFIBRILLATOR IMPLANT WITH CARDIAC CATHETERIZATION WITH ACUTE MYOCARDIAL INFARCTION (AMI), HEART FAILURE OR SHOCK (added 10-1-03)
- 536* CARDIAC DEFIBRILLATOR IMPLANT WITH CARDIAC CATHETERIZATION WITHOUT ACUTE
 MYOCARDIAL INFARCTION (AMI). HEART FAILURE OR SHOCK (added 10-1-03)
- MYOCARDIAL INFARCTION (AMI), HEART FAILURE OR SHOCK (added 10-1-03) 537* LOCAL EXCISION AND REMOVAL OF INTERNAL FIXATION DEVICES EXCEPT HIP AND FEMUR WITH CC (added 10-1-03)
- 538* LOCAL EXCISION AND REMOVAL OF INTERNAL FIXATION DEVICES EXCEPT HIP AND FEMUR WITHOUT CC (added 10-1-03)
- 539* LYMPHOMA AND LEUKEMIA WITH MAJOR O.R. PROCEDURE WITH CC (added 10-1-03)
- 540* LYMPHOMA AND LEUKEMIA WITH MAJOR O.R. PROCEDURE WITHOUT CC (added 10-1-03)

- 541* ECMO OR TRACHEOSTOMY WITH MECHANICAL VENTILATION 96+ HOURS OR PRINCIPAL DIAGNOSES EXCEPT FACE, MOUTH AND NECK DIAGNOSES WITH MAJOR OPERATING ROOM PROCEDURE (added 10-1-04)
- 542* TRACHEOSTOMY WITH MECHANICAL VENTILATION 96+ HOURS OR PRINCIPAL DIAGNOSIS EXCEPT FACE, MOUTH AND NECK DIAGNOSES WITHOUT MAJOR OPERATING ROOM PROCEDURE (added 10-1-04)
- 543* CRANIOTOMY WITH IMPLANT OF CHEMO AGENT OR ACUTE COMPLEX CNS PRINCIPAL DIAGNOSIS (added 10-1-04)
- 543* CRANIOTOMY WITH MAJOR DEVICE IMPLANT OR ACUTE COMPLEX CNS PRINCIPAL DIAGNOSIS (added 10-1-04 until 10-1/06)
- 544* MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY (added 10-1-05)
- 545* REVISION OF HIP OR KNEE REPLACEMENT (added 10-1-05)
- 546* SPINAL FUSIONS EXCEPT CERVICAL WITH CURVATURE OF THE SPINE OR MALIGNANCY (added 10-1-05)
- 547* CORONARY BYPASS WITH CARDIAC CATHETERIZATION WITH MCV DIAGNOSIS (added 10- 1-05)
- 548* CORONARY BYPASS WITH CARDIAC CATHETERIZATION WITHOUT MCV DIAGNOSIS (added 10-1-05)
- 549* CORONARY BYPASS WITHOUT CARDIAC CATHETERIZATION WITH MCV DIAGNOSIS (added 10-1-05)
- 550* CORONARY BYPASS WITHOUT CARDIAC CATHETERIZATION WITHOUT MCV DIAGNOSIS (added 10-1-05)
- 551* PERMANENT CARDIAC PACEMAKER IMPLANT WITH MCV DIAGNOSIS OR AICD LEAD OR GENERATOR (added 10-1-05)
- 552* OTHER PERMANENT CARDIAC PACEMAKER IMPLANT WITHOUT MCV DIAGNOSIS (added 10-1-05)
- 553* OTHER VASCULAR PROCEDURES WITH COMPLICATIONS AND COMORBIDITIES (added 10-1-05)
- 554* OTHER VASCULAR PROCEDURES WITHOUT COMPLICATIONS AND COMORBIDITIES (added 10-1-05)
- 555* PERCUTANEOUS CARDIOVASCULAR PROCEDURE WITH MCV DIAGNOSIS (added 10-1-05)
- 556* PERCUTANEOUS CARDIOVASCULAR PROCEDURE WITH NON DRUG-ELUTING STENT WITHOUT MCV DIAGNOSIS (added 10-1-05)
- 557* PERCUTANEOUS CARDIOVASCULAR PROCEDURE WITH NON DRUG-ELUTING STENT WITH MCV DIAGNOSIS (added 10-1-05)
- 558* PERCUTANEOUS CARDIOVASCULAR PROCEDURE WITH NON DRUG-ELUTING STENT WITH MCV DIAGNOSIS (added 10-1-05)
- 559* ACUTE ISCHEMIC STROKE WITH USE OF THROMBOLYTIC AGENT (added 10-1-05)
- 560* BACTERIAL & TUBERCULOUS INFECTIONS OF NERVOUS SYSTEM (added 10-1-06)
- 561* NON-BACTERIAL INFECTIONS OF NERVOUS SYSTEM EXCEPT VIRAL MENINGITIS (added 10-1-06)
- 562* SEIZURE AGE >17 W COMPLICATIONS & COMORBIDITIES (added 10-1-06)
- 563* SEIZURE AGE >17 WITHOUT COMPLICATIONS & COMORBIDITIES (added 10-1-06)
- 564* HEADACHES >17 (added 10-1-06)
- 565* RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT 96+ HRS (added 10-1-06)
- 566* RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT <96 HRS (added 10-1-06)
- 567* STOMACH, ESOPHAGEAL & DUODENAL PROC AGE >17 W CC W MAJOR GI DX (added 10-1-06)
- $568 \, \star \,$ STOMACH, ESOPHAGEAL & DUODENAL PROC AGE >17 W CC W/O MAJOR GI DX (added 10-1-06)
- 569* MAJOR SMALL & LARGE BOWEL PROCEDURES W CC W MAJOR GI DX (added 10-1-06)
- 570* MAJOR SMALL & LARGE BOWEL PROCEDURES W CC W/O MAJOR GI DX (added 10-1-06)
- 571* MAJOR ESOPHAGEAL DISORDERS (added 10-1-06)
- 572* MAJOR GASTROINTESTINAL DISORDERS AND PERITONEAL INFECTIONS (added 10-1-06)
- 573* MAJOR BLADDER PROCEDURES (added 10-1-06)
- 574* MAJOR HEMATOLOGIC/IMMUNOLOGIC DX EXCEP SCYLE CELL CRISIS & COAG (added 10-1-06)
- 575* SEPTICEMIA W MECHANICAL VENTILATOR 96+ HOURS AGE >17 (added 10-1-06)
- 576* SEPTICEMIA W MECHANICAL VENTILATOR W/O 96+ HOURS AGE >17 (added 10-1-06)
- 577* CAROTID ARTERY STENT PROCEDURE (added 10-1-06)
- 578* INFECTIOUS & PARASITIC DISEASES W OR PROCEDURE (added 10-1-06)
- 579* POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS W OR PROCEDURE (added 10-1-06)

*Change made in DRG classification. Hospitals provided the Office of Health Care Statistics (OHCS) with ICD-9-CM codes, rather than DRGs, so there was no need for the hospitals to be aware of DRG changes. The DRG was assigned by OHCS using 3M software (reference given on page 3) which classified the hospital discharge into a DRG based on the ICD-9-CM codes and other data such as age. OHCS accounted for DRG changes by using the DRG definitions which applied to the date of hospital discharge.

Major Diagnosis Category (MDC) *

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0 = Ungroupable
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1 = Nervous System

2 = Eve

3 = Ear, Nose, Mouth & Throat

4 = Respiratory System

5 = Circulatory System

6 = Digestive System

7 = Hepatobiliary System & Pancreas

8 = Musculoskeletal System & Connective Tissue

9 = Skin, Subcutaneous Tissue & Breast

10 = Endocrine, Nutritional & Metabolic System

11 = Kidney & Urinary Tract

12 = Male Reproductive System

13 = Female Reproductive System

14 = Pregnancy, Childbirth & the Puerperium

15 = Newborn & Other Neonates (Perinatal Period)

16 = Blood and Blood-Forming Disorders

17 = Myeloproliferative DDs (Diff Neoplasms)

18 = Infectious and Parasitic DDs

19 = Mental Diseases and Disorders

20 = Alcohol/Drug Use or Induced Mental Disorders

21 = Injuries, Poisoning and Toxic Effect of Drugs

22 = Burns

23 = Factors Influencing Health Status

24 = Multiple Significant Trauma

25 = Human Immunodeficiency Virus Infection

*Patients having heart, liver, lung, simultaneous pancreas/kidney, pancreas, or bone marrow transplants, or tracheostomies, traditionally categorized as PRE MDC (0), are assigned by the DRG Grouper into the following DRGs independent of the MDC of the principal diagnosis: 476, 477, 480-483, 495, 512, 513. DRGs (468,469,470) associated with all MDCs are assigned independent of the MDC of the principal diagnosis if the diagnosis is valid. Otherwise, this is the traditional Health Care Financing Administration (HCFA) MDC.

Total Charge

Total dollars and cents amount charged for the encounter (with 2 decimal digits).

. = Not reported

Emergency Department Charge

Sum of dollar and cent amounts charged for the encounter using the National Uniform Billing Committee's (NUBC) revenue codes 450 and 451 (with 2 decimal digits).

. = Not reported

Primary Payer Category

01 = Medicare

02 = Medicaid

03 = Other government

04 = Blue Cross/Blue Shield

- 05 = Other commercial
- 06 = Managed care
- 07 = Self pay
- 08 = Industrial and worker's compensation
- 09 = Charity/Unclassified
- 10 = Unknown
- 13 = CHIP (Children's Health Insurance Plan)
- 99 = Not reported

Secondary Payer Category Third Payer Category

Descriptions are the same as primary payer category.

Third Payer Category

Descriptions are the same as primary payer category.

Patient's Relationship to the First Insured Person

(Starting with 2010 Data we have moved fully to the UB-04 coding below, previous datasets varied by hospital between UB-04 and UB-92 formats) newer UB-04 coding

- 01 Spouse
- 04 Grandfather or Grandmother
- 05 Grandson or Granddaughter
- 07 Nephew or Niece
- 09 Unknown/Other Relationship
- 10 Foster Child
- 15 Ward Ward of the Court. This code indicates that the patient is a ward of the insured as a result of a court order.
- 17 Stepson or Stepdaughter
- 18 Self
- 19 Child
- 20 Employee
- 21 Unknown
- 22 Handicapped Dependent
- 23 Sponsored Dependent
- 24 Dependent of Minor Dependent
- 29 Significant Other
- 32 Mother
- 33 Father
- 36 Emancipated Minor
- 39 Organ Donor
- 40 Cadaver Donor
- 41 Injured Plaintiff
- 43 Child Where Insured Has No Financial Responsibility
- 53 Life Partner

older UB-92 coding

- 1 = Patient is the named insured
- 2 = Spouse
- 3 = Natural Child/insured has financial responsibility
- 4 = Natural Child/insured does not have financial responsibility
- 5 = Step Child
- 6 = Foster Child
- 7 = Ward of the Court (Patient is ward of the insured as a result of a court order.)
- 8 = Employee (The patient is employed by the named insured.)
- 9 = Unknown
- 10 = Handicapped Dependent (Dependent child whose coverage extends beyond normal termination age limits as a result of laws or agreements extending coverage.)
- 11 = Organ Donor (Code is used in cases where bill is submitted for care given to organ donor where such care is paid by the receiving patient's insurance coverage.)
- 12 = Cadaver Donor (Code is used where bill is submitted for procedures performed on a cadaver donor where such procedures are paid by the receiving patient's insurance coverage.)

- 13 = Grandchild
- 14 = Niece or Nephew
- 15 = Injured Plaintiff (Patient is claiming insurance as a result of injury covered by insured.)
- 16 = Sponsored Dependent (Individual not normally covered by insurance coverage but coverage has been specially arranged to include relationships such as grandparent or former spouse that would require further investigation by the payer.)
- 17 = Minor Dependent of a Minor Dependent (Code is used where patient is a minor and a dependent of another minor who in turn is a dependent, although not a child, of the insured.)
- 18 = Parent
- 19 = Grandparent
- 20 = Life Partner
- blank = Not reported

Record ID Number

A unique number for each discharge, which is also unique across all years that inpatient discharge data are available.

Outlier, Total Charge

- 0 = No
- 1 = Yes

NOTE: A charge is an outlier if it is above 2.5 standard deviations from the mean of facility charges. Means and standard deviations are APR-DRG specific and calculated at the state level for a calendar year.

Outlier, Length of Stay in hours

- $\bar{0} = No$
- 1 = Yes

NOTE: A length of stay is an outlier if it is above 2.5 standard deviations from the mean of the length of stay. Means and standard deviations are APR-DRG specific and calculated at the state level for a calendar year. Not currently available in dataset.

Encounter Quarter

- 1 = First Quarter (January 1 to March 31)
- 2 = Second Quarter (April 1 to June 30)
- 3 = Third Quarter (July 1 to September 30)
- 4 = Fourth Quarter (October 1 to December 31)

Record ID Number

A unique number for each encounter, which is also unique across all years that ED data are available.

Encounter Type

o= ED Outpatient Visit i = ED Inpatient Admission

Principal Diagnostic Category

ICD-9 Range 1 = Diabetes 250.0-250.9 2 = Otitis media and Eustachian tube disorders 381-382

3 = Heart dis. excl. ischemic 391-392.0, 393-398, 402, 404, 415, 416, 420-429

4 =Acute upper respiratory inf., excl. pharyngitis 460-461,463-4665 = Acute pharyngitis

6 = Pneumonia 480-486

7 = Chronic and unspecified bronchitis 490-491 8 = Asthma493 555-558 9 = Noninfectious enteritis and colitis

10 = Urinary tract infection, site not specified 720-724 11 = Dorsopathies

725-729

12 = Rheumatism, excluding back

13 = Convulsions	780.3
14 = Headache and migraine	784.0,346.90
15 = Chest pain	786.5
16 = Abdominal pain	789.0
17 = Fractures, excluding lower limb	800-819
18 = Fracture of lower limb	820-829
19 = Sprains and strains, excluding ankle and back	840-844,845.1,848
20 = Sprains and strains of ankle	845.0
21 = Sprains and strains of back	846-847
22 = Open wound of head	870-873
23 = Open wound, excluding head	874-897
24 = Superficial injury	910-919
25 = Contusion with intact skin surface	920-924
99 = All other	

External Cause Code (E-Code)

Supplementary classification of External Causes of Injury and Poisoning. Refer to International Classification of Diseases (9th Revision): Clinical Modification for description.

There is an "implied" decimal point between the 3rd and 4th digit (decimal point is part of ICD-9-CM E-code but has been stripped out of data).

Blank = Not reported

The ICD-9-CM E-codes can be looked up on the Internet at Yaki Technologies' Website www.eicd.com/eicdmain.htm.

Admission Hour

The hour during which the patient arrived at the Emergency Department (using the 24 hour clock format).

Patient Severity Subclass Value

- 0 = No value assigned (record is ungroupable into a APR-DRG)
- 1 = Minor severity of illness subclass
- 2 = Moderate severity of illness subclass
 3 = Major severity of illness subclass
- 4 = Extreme severity of illness subclass

Note: Patient severity subclass value should be used as a subcategory of the APR-DRG.

Patient Risk of Mortality Value

- 0 = No value assigned (record is ungroupable into a APR-DRG)
- 1 = Minor risk of mortality
- 2 = Moderate risk of mortality
- 3 = Major risk of mortality
- 4 = Extreme risk of mortality

Note: Patient risk of mortality value should be used as a subcategory of the APR-DRG.

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001* Liver transplant (until 10/1/06)
001* Liver transplant and/or intestinal transplant (after 10/1/06)
002 Heart &/or lung transplant
003 Bone marrow transplant
004* Tracheostomy with long term mechanical ventilation w extensive procedure
 (until 10/1/06)
004* ECMO or tracheostomy with long term mechanical ventilation w extensive
    procedure (after 10/1/06)
004* Tracheostomy with mechanical ventilation 96+ hours w extensive
procedure or ECMO (after 10/1/07)
005* Tracheostomy with long term mechanical ventilation w/o extensive procedure
(until 10/1/07)
005* Tracheostomy with mechanical ventilation 96+ hours w/o extensive procedure
 (after 10/1/07)
006 Pancreas transplant
020 Craniotomy for trauma
021 Craniotomy except for trauma
022 Ventricular shunt procedures
023 Spinal procedures
024 Extracranial vascular procedures
026 Other nervous system and related procedures
040 Spinal disorders & injuries
041 Nervous system malignancy
042 Degenerative nervous system disorders exc mult sclerosis
043 Multiple sclerosis & other demyelinating diseases
044 Intracranial hemorrhage
045 CVA & precerebral occlusion w infarct
046 Nonspecific CVA & precerebral occlusion w/o infarct
047 Transient ischemia
048 Peripheral, cranial & autonomic nerve disorders
049 Bacterial & tuberculous infections of nervous system
050 Non-bacterial infections of nervous system exc viral meningitis
051 Viral meningitis
052 Nontraumatic stupor & coma
053 Seizure
054 Migraine & other headaches
055 Head trauma w coma >1 hr or hemorrhage
056 Brain contusion/laceration & complicated skull fx, coma <1 hr or no coma
057 Concussion, closed skull fx nos, uncomp intracr injury, coma <1 hr or no coma
058 Other disorders of nervous system
070 Orbital procedures
073 Eye procedures except orbit
080 Acute major eye infections
082 Eye disorders except major infections
089 Major cranial/facial bone procedures
090 Major larynx & tracheal procedures
091 Other major head & neck procedures
092 Facial bone procedures except major cranial/facial bone procedures
093 Sinus & mastoid procedures
095 Cleft lip & palate repair
097 Tonsil & adenoid procedures
098 Other ear, nose, mouth & throat procedures
110 Ear, nose, mouth, throat cranial/facial malignancies
111 Vertigo & other labyrinth disorders
113 Infections of upper respiratory tract
114 Dental & oral disease
115 Other ear, nose, mouth, throat & cranial/facial diagnoses
120 Major respiratory & chest procedures
121 Other respiratory & chest procedures
130 Respiratory system diagnosis w ventilator support 96+ hours
131 Cystic fibrosis - pulmonary disease
132 Bpd & oth chronic respiratory dis arising in perinatal period
133 Pulmonary edema & respiratory failure
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134 Pulmonary embolism

135 Major chest & respiratory trauma 136 Respiratory malignancy 137 Major respiratory infections & inflammations 138 Bronchiolitis & rsv pneumonia 139 Other pneumonia 140 Chronic obstructive pulmonary disease 141 Asthma 142 Interstitial lung disease 143 Other respiratory diagnoses except signs, symptoms & minor diagnoses 144 Respiratory system signs, symptoms & other diagnoses 160 Major cardiothoracic repair of heart anomaly 161 Cardiac defibrillator & heart assist implant 162 Cardiac valve procedures w cardiac catheterization 163 Cardiac valve procedures w/o cardiac catheterization 165 Coronary bypass w cardiac cath or percutaneous cardiac procedure 166 Coronary bypass w/o cardiac cath or percutaneous cardiac procedure 167 Other cardiothoracic procedures 169 Major thoracic & abdominal vascular procedures 170 Permanent cardiac pacemaker implant w AMI, heart failure or shock 171 Perm cardiac pacemaker implant w/o AMI, heart failure or shock 173 Other vascular procedures 174 Percutaneous cardiovascular procedures w AMI 175 Percutaneous cardiovascular procedures w/o AMI 176 Cardiac pacemaker & defibrillator device replacement 177 Cardiac pacemaker & defibrillator revision except device replacement 180 Other circulatory system procedures 190 Acute myocardial infarction 191 Cardiac catheterization w circ disord exc ischemic heart disease 192 Cardiac catheterization for ischemic heart disease 193 Acute & subacute endocarditis 194 Heart failure 196 Cardiac arrest 197 Peripheral & other vascular disorders 198 Angina pectoris & coronary atherosclerosis 199 Hypertension 200 Cardiac structural & valvular disorders 201 Cardiac arrhythmia & conduction disorders 203 Chest pain 204 Syncope & collapse 205 Cardiomyopathy 206 Malfunction, reaction & comp of cardiac/vasc device or proc 207 Other circulatory system diagnoses 220 Major stomach, esophageal & duodenal procedures 221 Major small & large bowel procedures 222 Other stomach, esophageal & duodenal procedures 223 Other small & large bowel procedures 224 Peritoneal adhesiolysis 225 Appendectomy 226 Anal procedures 227 Hernia procedures except inquinal, femoral & umbilical 228 Inquinal, femoral & umbilical hernia procedures 229 Other digestive system & abdominal procedures 240 Digestive malignancy 241 Peptic ulcer & gastritis 242 Major esophageal disorders 243 Other esophageal disorders 244 Diverticulitis & diverticulosis 245 Inflammatory bowel disease 246 Gastrointestinal vascular insufficiency 247 Intestinal obstruction 248 Major gastrointestinal & peritoneal infections 249 Nonbacterial gastroenteritis, nausea & vomiting 251 Abdominal pain

252 Malfunction, reaction & complication of GI device or procedure

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253 Other & unspecified gastrointestinal hemorrhage
254 Other digestive system diagnosis
260 Major pancreas, liver & shunt procedures
261 Major biliary tract procedures
262 Cholecystectomy except laparoscopic
263 Laparoscopic cholecystectomy
264 Other hepatobiliary & pancreas procedures
279 Hepatic coma & other major acute liver disorders
280 Alcoholic liver disease
281 Malignancy of hepatobiliary system & pancreas
282 Disorders of pancreas except malignancy
283 Other disorders of liver
284 Disorders of the gall bladder & biliary tract
301 Hip joint replacement
302 Knee joint replacement
303 Dorsal & lumbar fusion proc for curvature of back
304 Dorsal & lumbar fusion proc except for curvature of back
305 Amputation of lower limb except toes
308 Hip & femur procedures for trauma except joint replacement
309 Hip & femur procedures for nontrauma except joint replacement
310 Intervertebral disc excision & decompression
312 Skin graft except hand, for musculoskeletal & connective tissue diagnosis
313 Knee & lower leg procedures except foot
314 Foot & toe procedures
315 Shoulder, elbow & forearm procedures
316 Hand & wrist procedures
317 Tendon, muscle &other soft tissue procedures
320 Other musculoskeletel system & connective tissue procedures
321 Cervical spinal fusion & other back/neck procedures except disc excision/dec
340 Fracture of femur
341 Fracture of pelvis or dislocation of hip
342 Fracture or dislocation except femur, pelvis & back
343 Musculoskeletal malignancy & pathological fractures d/t muscskel malig
344 Osteomyelitis, septic arthritis & other musculoskeletal infections
346 Connective tissue disorders
347 Other back & neck disorders, fractures & injuries
349 Malfunction, reaction & complications of orthopedic device or procedure
351 Other musculoskeletal system & connective tissue diagnoses
361 Skin graft for skin & subcutaneous tissue diagnoses
362 Mastectomy procedures
363 Breast procedures except mastectomy
364 Other skin, subcutaneous tissue & breast procedures
380 Skin ulcers
381 Major skin disorders
382 Malignant breast disorders
383 Cellulitis & other bacterial skin infections
384 Contusion, open wound & other trauma to skin & subcutaneous tissue
385 Other skin, subcutaneous tissue & breast disorders
401 Pituitary & adrenal procedures
403 Procedures for obesity
404 Thyroid, parathyroid & thyroglossal procedures
405 Other procedures for endocrine, nutrititional & metabolic disorders
420 Diabetes
421 Malnutrition, failure to thrive & other nutritional disorders
422 Hypovolemia & electrolyte disorders
423 Inborn errors of metabolism
424 Other endocrine disorders
440 Kidney transplant
441 Major bladder procedures
442 Kidney & urinary tract procedures for malignancy
443 Kidney & urinary tract procedures for nonmalignancy
444 Renal dialysis access device procedure only
445 Other bladder procedures
446 Urethral & transurethral procedures
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447 Other kidney, urinary tract & related procedures
460 Renal failure
461 Kidney & urinary tract malignancy
462 Nephritis & nephrosis
463 Kidney & urinary tract infections
465 Urinary stones & acquired upper urinary tract obstruction
466 Malfunction, reactions & comp of genitourinary device or procedure
468 Other kidney & urinary tract diagnoses, signs & symptoms
480 Major male pelvic procedures
481 Penis procedures
482 Transurethral prostatectomy
483 Testes & scrotal procedures
484 Other male reproductive system & related procedures
500 Malignancy, male reproductive system
501 Male reproductive system diagnoses except malignancy
510 Pelvic evisceration, radical hysterectectomy & radical vulvectomy
511 Uterine & adnexa procedures for ovarian & adnexal malignancy
512 Uterine & adnexa procedures for non-ovarian & non-adnexal malig
513 Uterine & adnexa procedures for non-malignancy except leiomyoma
514 Female reproductive system reconstructive procedures
517 Dilation & curettage for non-obstetric diagnoses
519 Uterine & adnexa procedures for leiomyoma
530 Female reproductive system malignancy
531 Female reproductive system infections
532 Menstrual & other female reproductive system disorders
540 Cesarean delivery
541 Vaginal delivery w sterilization &/or D&C
542 Vaginal delivery w complicating proc except sterilization &/or D&C
544 D&C, aspiration curettage or hysterotomy for obstetric diagnoses
560 Vaginal delivery
561 Postpartum & post abortion diagnoses w/o procedure
563 Threatened abortion
564 Abortion w/o D&C, aspiration curettage or hysterotomy
565 False labor
566 Other antepartum diagnoses
580 Neonate, transferred <5 days old, not born here
581 Neonate, transferred <5 days old, born here
583 Neonate, w ecmo
588 Neonate bwt <1500 g with major procedure
589* Neonate bwt <500 \text{ g} (until 10/1/10)
589* Neonate bwt <500 g or GA < 24 weeks (after 10/1/10)
591 Neonate, birthwt 5\bar{0}0-749g w/o major procedure
593 Neonate, birthwt 750g-999g w/o major procedure
602 Neonate, birthwt 1000-1249g w respiratory distress syndrome or major anomaly
603 Neonate, birthwt 1000-1249g w or w/o other significant condition
611 Neonate, birthwt 1500-1999g w major anomaly
612 Neonate, birthwt 1500-1999g w respiratory distress syndrome/oth maj resp cond
613 Neonate, birthwt 1500-1999g w congenital or perinatal infections
614 Neonate, birthwt 1500-1999\overline{g} w or \overline{w}/o other significant conditions
621 Neonate, birthwt 2000-2499g w major anomaly
622 Neonate, birthwt 2000-2499g w respiratory distress syndrome
623 Neonate, birthwt 2000-2499g w congenital or perinatal infections
625 Neonate, birthwt 2000-2499g, born here, w other significant condition
626 Neonate, bwt 2000-2499g, born here, normal NB \& NB w other prob
630 Neonate, birthwt >2499g w major cardiovascular procedure 631 Neonate, birthwt >2499g w other major procedure
633 Neonate, birthwt >2499g w major anomaly
634 Neonate, birthwt >2499g w respiratory distress syndrome/oth maj resp cond
636 Neonate, birthwt >2499g w congenital/perinatal infections
639 Neonate, birthwt >2499g, born here, w other significant condition
640 Neonate, bwt >2499g, normal NB & NB w other problems
650 Splenectomy
651 Other procedures of blood & blood forming organs
660 Major hematologica/immunologic diagnoses exce sickle cell crisis & coag
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All Patient Refined Diagnosis Related Group (APR-DRG) Version 20.0+ (2005 through present)

661 Coagulation & platelet disorders 662 Sickle cell anemia crisis 663 Other anemia & disorders of blood & blood forming organs 680 Major O.R. procedures for lymphatic/hematopoietic/other neoplasms 681 Other O.R. procedures for lymphatic/hematopoietic/other neoplasms 690 Acute leukemia 691 Lymphoma, myeloma & non-acute leukemia 692 Radiotherapy 693 Chemotherapy 694 Lymphatic & other malignancies & neoplasms of uncertain behavior 710 Infectious & parasitic diseases including HIV w O.R.procedure 711 Postoperative, post traumatic, other device infections w O.R. procedure 720 Septicemia & disseminated infections 721 Postoperative, post-traumatic infections, other device infections 723 Viral illness 724 Other infectious & parasitic diseases 740 Mental illness diagnosis w O.R. procedure 750 Schizophrenia 751 Major depressive disorders & other/unspecified psychoses 752 Disorders of personality & impulse control 753 Bipolar disorders 754 Depression except major depressive disorders 755 Adjustment disorders & neuroses except depressive diagnoses 756 Acute anxiety & delirium states 757 Organic mental health disturbances 758 Childhood behavioral disorders 759 Eating disorders 760 Other mental health disorders 770 Drug & alcohol abuse or dependence, left against medical advice 771 Alcohol & drug dependence w rehabilitation therapy 773 Opioid abuse & dependence 774 Cocaine abuse & dependence 775 Alcohol abuse & dependence 776 Other drug abuse & dependence 791 O.R. procedures for other complications of treatment 811 Allergic reactions 812 Poisoning & toxic effects of drugs 813 Other complications of treatment 815 Other injury, poisoning & toxic effect diagnoses 816 Toxic effects of non-medical substances 841 Extensive $3^{\rm rd}$ degree burns w skin graft 842 Full thickness burns w skin graft 843 Extensive $3^{\rm rd}$ degree burns or full thickness burns w/o skin graft 844 Partial thickness burns w or w/o skin graft 850 Procedure w diagnoses of rehab, aftercare or other contact w health services 860 Rehabilitation 861 Signs, symptoms & other factors influencing health status 862 Other aftercare & convalescence 863 Neonatal aftercare 890 HIV w multiple major HIV related conditions 892 HIV w major HIV related infections 893 HIV w multiple significant HIV related conditions 894 HIV w one significant HIV condition or w/o significant related condition 910 Craniotomy for multiple sig trauma 911 Extensive abdominal/thoracic procedures for multiple significant trauma 912 Musculoskeltal & other procedures for multiple significant trauma 930 Multiple significant trauma w/o O.R. procedure 950 Extensive procedure unrelated to principal diagnosis 951 Moderately extensive procedure unrelated to principal diagnosis 952 Nonextensive procedure unrelated to principal diagnosis 955 Principal diagnosis invalid as discharge diagnosis

956 Ungroupable

All Patient Refined Diagnosis Related Group (APR-DRG) Version 20.0+ (2005 through present)

Heart transplant or implant of heart assist system w MCC

002 Heart transplant or implant of heart assist system w/o MCC 003 "ECMO or trach w MV 96+ hrs or PDX exc face, mouth & neck w maj O.R." 004 "Trach w MV 96+ hrs or PDX exc face, mouth & neck w/o maj O.R." 005 Liver transplant w MCC or intestinal transplant 006 Liver transplant w/o MCC 007 Lung transplant 008 Simultaneous pancreas/kidney transplant 009* Bone marrow transplant (prior to 10/1/10) 010 Pancreas transplant 011 "Tracheostomy for face, mouth & neck diagnoses w MCC" 012 "Tracheostomy for face, mouth & neck diagnoses w CC" 013 "Tracheostomy for face, mouth & neck diagnoses w/o CC/MCC" 014* Allogeneic bone marrow transplant (beginning 10/1/10) 015* Autologous bone marrow transplant (beginning 10/1/10 to 9/30/11) Autologous bone marrow transplant w CC/MCC (beginning 10/1/11) 016* 017* Autologous bone marrow transplant w/o CC/MCC (beginning 10/1/11) 020 Intracranial vascular procedures w PDX hemorrhage w MCC 021 Intracranial vascular procedures w PDX hemorrhage w CC 022 Intracranial vascular procedures w PDX hemorrhage w/o CC/MCC 023 Cranio w major dev impl/acute complex CNS PDX w MCC or chemo implant 024 Cranio w major dev impl/acute complex CNS PDX w/o MCC 025 Craniotomy & endovascular intracranial procedures w MCC 026 Craniotomy & endovascular intracranial procedures w CC 027 Craniotomy & endovascular intracranial procedures w/o CC/MCC 028 Spinal procedures w MCC 029 Spinal procedures w CC or spinal neurostimulators 030 Spinal procedures w/o CC/MCC 031 Ventricular shunt procedures w MCC 032 Ventricular shunt procedures w CC 033 Ventricular shunt procedures w/o CC/MCC 034 Carotid artery stent procedure w MCC 035 Carotid artery stent procedure w CC 036 Carotid artery stent procedure w/o CC/MCC 037 Extracranial procedures w MCC 038 Extracranial procedures w CC 039 Extracranial procedures w/o CC/MCC 040 Periph/cranial nerve & other nerv syst proc w MCC 041 Periph/cranial nerve & other nerv syst proc w CC or periph neurostim 042 Periph/cranial nerve & other nerv syst proc w/o CC/MCC 052 Spinal disorders & injuries w CC/MCC 053 Spinal disorders & injuries w/o CC/MCC 054 Nervous system neoplasms w MCC 055 Nervous system neoplasms w/o MCC 056 Degenerative nervous system disorders w MCC 057 Degenerative nervous system disorders w/o MCC 058 Multiple sclerosis & cerebellar ataxia w MCC 059 Multiple sclerosis & cerebellar ataxia w CC Multiple sclerosis & cerebellar ataxia w/o CC/MCC 060 061 Acute ischemic stroke w use of thrombolytic agent w MCC 062 Acute ischemic stroke w use of thrombolytic agent w CC 063 Acute ischemic stroke w use of thrombolytic agent w/o CC/MCC 064 Intracranial hemorrhage or cerebral infarction w MCC 065 Intracranial hemorrhage or cerebral infarction w CC 066 Intracranial hemorrhage or cerebral infarction w/o CC/MCC

- Nonspecific CVA & precerebral occlusion w/o infarct w MCC
- Nonspecific CVA & precerebral occlusion w/o infarct w/o MCC
- 069 Transient ischemia
- Nonspecific cerebrovascular disorders w MCC
- Nonspecific cerebrovascular disorders w CC
- Nonspecific cerebrovascular disorders w/o CC/MCC
- 073 Cranial & peripheral nerve disorders w MCC
- 074 Cranial & peripheral nerve disorders w/o MCC
- 075 Viral meningitis w CC/MCC
- 076 Viral meningitis w/o CC/MCC
- 077 Hypertensive encephalopathy w MCC
- 078 Hypertensive encephalopathy w CC
- Hypertensive encephalopathy w/o CC/MCC
- Nontraumatic stupor & coma w MCC
- Nontraumatic stupor & coma w/o MCC
- "Traumatic stupor & coma, coma >1 hr w MCC"
- "Traumatic stupor & coma, coma >1 hr w CC"
- "Traumatic stupor & coma, coma >1 hr w/o CC/MCC"
- 085 "Traumatic stupor & coma, coma <1 hr w MCC"
- 086 "Traumatic stupor & coma, coma <1 hr w CC"
- "Traumatic stupor & coma, coma <1 hr w/o CC/MCC"
- 088 Concussion w MCC
- 089 Concussion w CC
- 090 Concussion w/o CC/MCC
- 091 Other disorders of nervous system w MCC
- Other disorders of nervous system w CC
- 093 Other disorders of nervous system w/o CC/MCC
- 094 Bacterial & tuberculous infections of nervous system w MCC
- Description
 Bacterial & tuberculous infections of nervous system w CC
- 096 Bacterial & tuberculous infections of nervous system w/o CC/MCC
- Non-bacterial infect of nervous sys exc viral meningitis w MCC
- Non-bacterial infect of nervous sys exc viral meningitis w CC
- 099 Non-bacterial infect of nervous sys exc viral meningitis w/o CC/MCC
- 100 Seizures w MCC
- 101 Seizures w/o MCC
- Headaches w MCC
- Headaches w/o MCC
- Orbital procedures w CC/MCC
- Orbital procedures w/o CC/MCC
- Extraocular procedures except orbit Intraocular procedures w CC/MCC
- Intraocular procedures w CC/MCCIntraocular procedures w/o CC/MCC
- 121 Acute major eye infections w CC/MCC
- 122 Acute major eye infections w/o CC/MCC
- 123 Neurological eye disorders
- Other disorders of the eye w MCC
- Other disorders of the eye w/o MCC
- 129 Major head & neck procedures w CC/MCC or major device
- Major head & neck procedures w/o CC/MCC
- 131 Cranial/facial procedures w CC/MCC
- 132 Cranial/facial procedures w/o CC/MCC
- "Other ear, nose, mouth & throat O.R. procedures w CC/MCC"
- "Other ear, nose, mouth & throat O.R. procedures w/o CC/MCC"
- 135 Sinus & mastoid procedures w CC/MCC
- Sinus & mastoid procedures w/o CC/MCC
- Mouth procedures w CC/MCC
- Mouth procedures w/o CC/MCC
- 139 Salivary gland procedures
- "Ear, nose, mouth & throat malignancy w MCC"
- "Ear, nose, mouth & throat malignancy w CC"
- "Ear, nose, mouth & throat malignancy w/o CC/MCC"
- 149 Dysequilibrium
- 150 Epistaxis w MCC
- 151 Epistaxis w/o MCC

- 152 Otitis media & URI w MCC
- 153 Otitis media & URI w/o MCC
- 154* "Nasal Trauma & Deformity w MCC" (prior to 10-1-08)
- 154*
- 155*
- "Other ear, nose, mouth & throat diagnoses w MCC" (beginning 10-1-08) "Nasal Trauma & Deformity w CC" (prior to 10-1-08) "Other ear, nose, mouth & throat diagnoses w CC" (beginning 10-1-08) 155*
- 156* "Nasal Trauma & Deformity w/o CC/MCC" (prior to 10-1-08)
- 156* "Other ear, nose, mouth & throat diagnoses w/o CC/MCC" (beginning 10-1-08)
- 157 Dental & oral diseases w MCC
- 158 Dental & oral diseases w CC
- 159 Dental & oral diseases w/o CC/MCC
- 163 Major chest procedures w MCC
- 164 Major chest procedures w CC
- 165 Major chest procedures w/o CC/MCC
- 166 Other resp system O.R. procedures w MCC
- Other resp system O.R. procedures w CC 167
- 168 Other resp system O.R. procedures w/o CC/MCC
- 175 Pulmonary embolism w MCC
- 176 Pulmonary embolism w/o MCC
- 177 Respiratory infections & inflammations w MCC
- 178 Respiratory infections & inflammations w CC
- Respiratory infections & inflammations w/o CC/MCC 179
- 180 Respiratory neoplasms w MCC
- Respiratory neoplasms w CC 181
- 182 Respiratory neoplasms w/o CC/MCC
- 183 Major chest trauma w MCC
- 184 Major chest trauma w CC
- 185 Major chest trauma w/o CC/MCC
- 186 Pleural effusion w MCC
- 187 Pleural effusion w CC
- 188 Pleural effusion w/o CC/MCC
- 189 Pulmonary edema & respiratory failure
- 190 Chronic obstructive pulmonary disease w MCC
- 191 Chronic obstructive pulmonary disease w CC
- 192 Chronic obstructive pulmonary disease w/o CC/MCC
- 193 Simple pneumonia & pleurisy w MCC
- 194 Simple pneumonia & pleurisy w CC
- 195 Simple pneumonia & pleurisy w/o CC/MCC
- 196 Interstitial lung disease w MCC
- 197 Interstitial lung disease w CC
- 198 Interstitial lung disease w/o CC/MCC
- 199 Pneumothorax w MCC
- 200 Pneumothorax w CC
- 201 Pneumothorax w/o CC/MCC
- 202 Bronchitis & asthma w CC/MCC
- 203 Bronchitis & asthma w/o CC/MCC
- 204 Respiratory signs & symptoms
- 205 Other respiratory system diagnoses w MCC
- 206 Other respiratory system diagnoses w/o MCC
- 207 Respiratory system diagnosis w ventilator support 96+ hours
- 208 Respiratory system diagnosis w ventilator support <96 hours
- 215 Other heart assist system implant
- 216 Cardiac valve & oth maj cardiothoracic proc w card cath w MCC
- 217 Cardiac valve & oth maj cardiothoracic proc w card cath w CC
- 218 Cardiac valve & oth maj cardiothoracic proc w card cath w/o CC/MCC
- 219 Cardiac valve & oth maj cardiothoracic proc w/o card cath w MCC
- 220 Cardiac valve & oth maj cardiothoracic proc w/o card cath w CC 221 Cardiac valve & oth maj cardiothoracic proc w/o card cath w/o CC/MCC
- 222 Cardiac defib implant w cardiac cath w AMI/HF/shock w MCC
- 223 Cardiac defib implant w cardiac cath w AMI/HF/shock w/o MCC
- 224 Cardiac defib implant w cardiac cath w/o AMI/HF/shock w MCC
- 225 Cardiac defib implant w cardiac cath w/o AMI/HF/shock w/o MCC
- 226 Cardiac defibrillator implant w/o cardiac cath w MCC
- Cardiac defibrillator implant w/o cardiac cath w/o MCC

- 228 Other cardiothoracic procedures w MCC
- 229 Other cardiothoracic procedures w CC
- Other cardiothoracic procedures w/o CC/MCC
- 231 Coronary bypass w PTCA w MCC
- 232 Coronary bypass w PTCA w/o MCC
- 233 Coronary bypass w cardiac cath w MCC
- 234 Coronary bypass w cardiac cath w/o MCC
- 235 Coronary bypass w/o cardiac cath w MCC
- 236 Coronary bypass w/o cardiac cath w/o MCC
- 237 Major cardiovasc procedures w MCC or thoracic aortic aneurysm repair
- 238 Major cardiovasc procedures w/o MCC
- 239 Amputation for circ sys disorders exc upper limb & toe w MCC
- 240 Amputation for circ sys disorders exc upper limb & toe w CC
- Amputation for circ sys disorders exc upper limb & toe w/o CC/MCC
- 242 Permanent cardiac pacemaker implant w MCC
- 243 Permanent cardiac pacemaker implant w CC
- 244 Permanent cardiac pacemaker implant w/o CC/MCC
- 245 AICD generator procedures
- 246 Perc cardiovasc proc w drug-eluting stent w MCC or 4+ vessels/stents
- 247 Perc cardiovasc proc w drug-eluting stent w/o MCC
- 248 Perc cardiovasc proc w non-drug-eluting stent w MCC or 4+ ves/stents
- 249 Perc cardiovasc proc w non-drug-eluting stent w/o MCC
- 250* Perc cardiovasc proc w/o coronary artery stent or AMI w MCC (prior to 10-1-08)
- 250* Perc cardiovasc proc w/o coronary artery stent w MCC (beginning 10-1-08)
- 251* Perc cardiovasc proc w/o coronary artery stent or AMI w/o MCC (prior to 10-1-08)
- 251* Perc cardiovasc proc w/o coronary artery stent w/o MCC (beginning 10-1-08)
- 252 Other vascular procedures w MCC
- 253 Other vascular procedures w CC
- Other vascular procedures w/o CC/MCC
- 255 Upper limb & toe amputation for circ system disorders w MCC
- 256 Upper limb & toe amputation for circ system disorders w CC
- 257 Upper limb & toe amputation for circ system disorders w/o CC/MCC
- 258 Cardiac pacemaker device replacement w MCC
- 259 Cardiac pacemaker device replacement w/o MCC
- 260 Cardiac pacemaker revision except device replacement w MCC
- 261 Cardiac pacemaker revision except device replacement w CC
- 262 Cardiac pacemaker revision except device replacement w/o CC/MCC
- Vein ligation & stripping
- Other circulatory system O.R. procedures
- 265* AICD lead procedures (beginning 10-1-08)
- 280 "Acute myocardial infarction, discharged alive w MCC"
- "Acute myocardial infarction, discharged alive w CC"
- "Acute myocardial infarction, discharged alive w/o CC/MCC"
- 283 "Acute myocardial infarction, expired w MCC"
- "Acute myocardial infarction, expired w CC"
- "Acute myocardial infarction, expired w/o CC/MCC"
- "Circulatory disorders except AMI, w card cath w MCC"
- "Circulatory disorders except AMI, w card cath w/o MCC"
- 288 Acute & subacute endocarditis w MCC
- 289 Acute & subacute endocarditis w CC
- 290 Acute & subacute endocarditis w/o CC/MCC
- Heart failure & shock w MCC
- 292 Heart failure & shock w CC
- 293 Heart failure & shock w/o CC/MCC
- 294 Deep vein thrombophlebitis w CC/MCC
- 295 Deep vein thrombophlebitis w/o CC/MCC
- 296 "Cardiac arrest, unexplained w MCC' 297 "Cardiac arrest, unexplained w CC"
- "Cardiac arrest, unexplained w CC""Cardiac arrest, unexplained w/o CC/MCC"
- 299 Peripheral vascular disorders w MCC
- 300 Peripheral vascular disorders w CC
- Peripheral vascular disorders w/o CC/MCC
- 302 Atherosclerosis w MCC
- 303 Atherosclerosis w/o MCC

- 304 Hypertension w MCC
- 305 Hypertension w/o MCC
- 306 Cardiac congenital & valvular disorders w MCC
- 307 Cardiac congenital & valvular disorders w/o MCC
- 308 Cardiac arrhythmia & conduction disorders w MCC
- 309 Cardiac arrhythmia & conduction disorders w CC
- 310 Cardiac arrhythmia & conduction disorders w/o CC/MCC
- 311 Angina pectoris
- 312 Syncope & collapse
- 313 Chest pain
- 314 Other circulatory system diagnoses w MCC
- 315 Other circulatory system diagnoses w CC
- 316 Other circulatory system diagnoses w/o CC/MCC
- "Stomach, esophageal & duodenal proc w MCC"
- "Stomach, esophageal & duodenal proc w CC"
- "Stomach, esophageal & duodenal proc w/o CC/MCC"
- Major small & large bowel procedures w MCC
- 330 Major small & large bowel procedures w CC
- 331 Major small & large bowel procedures w/o CC/MCC
- 332 Rectal resection w MCC
- 333 Rectal resection w CC
- 334 Rectal resection w/o CC/MCC
- 335 Peritoneal adhesiolysis w MCC
- 336 Peritoneal adhesiolysis w CC
- 337 Peritoneal adhesiolysis w/o CC/MCC
- 338 Appendectomy w complicated principal diag w MCC
- 339 Appendectomy w complicated principal diag w CC
- Appendectomy w complicated principal diag w/o CC/MCC
- 341 Appendectomy w/o complicated principal diag w MCC
- 342 Appendectomy w/o complicated principal diag w CC
- 343 Appendectomy w/o complicated principal diag w/o CC/MCC
- Minor small & large bowel procedures w MCC
- 345 Minor small & large bowel procedures w CC
- Minor small & large bowel procedures w/o CC/MCC
- 347 Anal & stomal procedures w MCC
- 348 Anal & stomal procedures w CC
- Anal & stomal procedures w/o CC/MCC
- 350 Inguinal & femoral hernia procedures w MCC
- 351 Inguinal & femoral hernia procedures w CC
- Inguinal & femoral hernia procedures w/o CC/MCC
- 353 Hernia procedures except inguinal & femoral w MCC
- Hernia procedures except inguinal & femoral w CC
- Hernia procedures except inguinal & femoral w/o CC/MCC
- 356 Other digestive system O.R. procedures w MCC
- Other digestive system O.R. procedures w CC
- Other digestive system O.R. procedures w/o CC/MCC
- 368 Major esophageal disorders w MCC
- 369 Major esophageal disorders w CC
- 370 Major esophageal disorders w/o CC/MCC
- 371 Major gastrointestinal disorders & peritoneal infections w MCC
- Major gastrointestinal disorders & peritoneal infections w CC
- 373 Major gastrointestinal disorders & peritoneal infections w/o CC/MCC
- 374 Digestive malignancy w MCC
- 375 Digestive malignancy w CC
- 376 Digestive malignancy w/o CC/MCC
- G.I. hemorrhage w MCC
- 378 G.I. hemorrhage w CC
- 379 G.I. hemorrhage w/o CC/MCC
- 380 Complicated peptic ulcer w MCC
- Complicated peptic ulcer w CC
- 382 Complicated peptic ulcer w/o CC/MCC
- 383 Uncomplicated peptic ulcer w MCC
- 384 Uncomplicated peptic ulcer w/o MCC
- 385 Inflammatory bowel disease w MCC

386 Inflammatory bowel disease w CC 387 Inflammatory bowel disease w/o CC/MCC 388 G.I. obstruction w MCC 389 G.I. obstruction w CC 390 G.I. obstruction w/o CC/MCC 391 "Esophagitis, gastroent & misc digest disorders w MCC" 392 "Esophagitis, gastroent & misc digest disorders w/o MCC" 393 Other digestive system diagnoses w MCC 394 Other digestive system diagnoses w CC 395 Other digestive system diagnoses w/o CC/MCC 405 "Pancreas, liver & shunt procedures w MCC" 406 "Pancreas, liver & shunt procedures w CC" 407 "Pancreas, liver & shunt procedures w/o CC/MCC" 408 Biliary tract proc except only cholecyst w or w/o c.d.e. w MCC 409 Biliary tract proc except only cholecyst w or w/o c.d.e. w CC 410 Biliary tract proc except only cholecyst w or w/o c.d.e. w/o CC/MCC 411 Cholecystectomy w c.d.e. w MCC 412 Cholecystectomy w c.d.e. w CC 413 Cholecystectomy w c.d.e. w/o CC/MCC 414 Cholecystectomy except by laparoscope w/o c.d.e. w MCC 415 Cholecystectomy except by laparoscope w/o c.d.e. w CC 416 Cholecystectomy except by laparoscope w/o c.d.e. w/o CC/MCC 417 Laparoscopic cholecystectomy w/o c.d.e. w MCC 418 Laparoscopic cholecystectomy w/o c.d.e. w CC 419 Laparoscopic cholecystectomy w/o c.d.e. w/o CC/MCC 420 Hepatobiliary diagnostic procedures w MCC 421 Hepatobiliary diagnostic procedures w CC 422 Hepatobiliary diagnostic procedures w/o CC/MCC 423 Other hepatobiliary or pancreas O.R. procedures w MCC 424 Other hepatobiliary or pancreas O.R. procedures w CC 425 Other hepatobiliary or pancreas O.R. procedures w/o CC/MCC 432 Cirrhosis & alcoholic hepatitis w MCC 433 Cirrhosis & alcoholic hepatitis w CC 434 Cirrhosis & alcoholic hepatitis w/o CC/MCC 435 Malignancy of hepatobiliary system or pancreas w MCC 436 Malignancy of hepatobiliary system or pancreas w CC 437 Malignancy of hepatobiliary system or pancreas w/o CC/MCC 438 Disorders of pancreas except malignancy w MCC 439 Disorders of pancreas except malignancy w CC 440 Disorders of pancreas except malignancy w/o CC/MCC 441 "Disorders of liver except malig, cirr, alc hepa w MCC 442 "Disorders of liver except malig,cirr,alc hepa w CC" 443 "Disorders of liver except malig,cirr,alc hepa w/o CC/MCC" 444 Disorders of the biliary tract w MCC 445 Disorders of the biliary tract w CC 446 Disorders of the biliary tract w/o CC/MCC 453 Combined anterior/posterior spinal fusion w MCC 454 Combined anterior/posterior spinal fusion w CC 455 Combined anterior/posterior spinal fusion w/o CC/MCC 456 Spinal fus exc cerv w spinal curv/malig/infec or 9+ fus w MCC 457 Spinal fus exc cerv w spinal curv/malig/infec or 9+ fus w CC Spinal fus exc cerv w spinal curv/malig/infec or 9+ fus w/o CC/MCC 458 459 Spinal fusion except cervical w MCC 460 Spinal fusion except cervical w/o MCC 461 Bilateral or multiple major joint procs of lower extremity w MCC 462 Bilateral or multiple major joint procs of lower extremity w/o MCC 463 "Wnd debrid & skn grft exc hand, for musculo-conn tiss dis w MCC" "Wnd debrid & skn grft exc hand, for musculo-conn tiss dis w CC" 464 "Wnd debrid & skn grft exc hand, for musculo-conn tiss dis w/o CC/MCC" 465 466 Revision of hip or knee replacement w MCC Revision of hip or knee replacement w CC 467

Revision of hip or knee replacement w/o CC/MCC

Major joint replacement or reattachment of lower extremity w MCC

Major joint replacement or reattachment of lower extremity w/o MCC

468

469

- 471 Cervical spinal fusion w MCC
- 472 Cervical spinal fusion w CC
- 473 Cervical spinal fusion w/o CC/MCC
- 474 Amputation for musculoskeletal sys & conn tissue dis w MCC
- 475 Amputation for musculoskeletal sys & conn tissue dis w CC
- 476 Amputation for musculoskeletal sys & conn tissue dis w/o CC/MCC
- 477 Biopsies of musculoskeletal system & connective tissue w MCC
- Biopsies of musculoskeletal system & connective tissue w CC
- 479 Biopsies of musculoskeletal system & connective tissue w/o CC/MCC
- 480 Hip & femur procedures except major joint w MCC
- 481 Hip & femur procedures except major joint w CC
- Hip & femur procedures except major joint w/o CC/MCC
- Major joint & limb reattachment proc of upper extremity w CC/MCC
- 484 Major joint & limb reattachment proc of upper extremity w/o CC/MCC
- 485 Knee procedures w pdx of infection w MCC
- 486 Knee procedures w pdx of infection w CC
- 487 Knee procedures w pdx of infection w/o CC/MCC
- 488 Knee procedures w/o pdx of infection w CC/MCC
- Knee procedures w/o pdx of infection w/o CC/MCC
- 490 Back & neck proc exc spinal fusion w CC/MCC or disc device/neurostim
- 491 Back & neck proc exc spinal fusion w/o CC/MCC
- "Lower extrem & humer proc except hip,foot,femur w MCC"
- "Lower extrem & humer proc except hip, foot, femur w CC"
- "Lower extrem & humer proc except hip,foot,femur w/o CC/MCC"
- Local excision & removal int fix devices exc hip & femur w MCC
- Local excision & removal int fix devices exc hip & femur w CC
- 497 Local excision & removal int fix devices exc hip & femur w/o CC/MCC
- 498 Local excision & removal int fix devices of hip & femur w CC/MCC
- 499 Local excision & removal int fix devices of hip & femur w/o CC/MCC
- 500 Soft tissue procedures w MCC
- 501 Soft tissue procedures w CC
- 502 Soft tissue procedures w/o CC/MCC
- Foot procedures w MCC
- Foot procedures w CC
- Foot procedures w/o CC/MCC
- Major thumb or joint procedures
- Major shoulder or elbow joint procedures w CC/MCC
- Major shoulder or elbow joint procedures w/o CC/MCC
- 509 Arthroscopy
- "Shoulder, elbow or forearm proc, exc major joint proc w MCC"
- "Shoulder, elbow or forearm proc, exc major joint proc w CC"
- "Shoulder, elbow or forearm proc, exc major joint proc w/o CC/MCC"
- "Hand or wrist proc, except major thumb or joint proc w CC/MCC"
- "Hand or wrist proc, except major thumb or joint proc w/o CC/MCC"
- Other musculoskelet sys & conn tiss O.R. proc w MCC
- Other musculoskelet sys & conn tiss O.R. proc w CC
- Other musculoskelet sys & conn tiss O.R. proc w/o CC/MCC
- 533 Fractures of femur w MCC
- Fractures of femur w/o MCC
- Fractures of hip & pelvis w MCC
- Fractures of hip & pelvis w/o MCC
- "Sprains, strains, & dislocations of hip, pelvis & thigh w CC/MCC"
- "Sprains, strains, & dislocations of hip, pelvis & thigh w/o CC/MCC"
- 539 Osteomyelitis w MCC
- 540 Osteomyelitis w CC
- Osteomyelitis w/o CC/MCC
- Pathological fractures & musculoskelet & conn tiss malig w MCC
- Pathological fractures & musculoskelet & conn tiss malig w CC
- Pathological fractures & musculoskelet & conn tiss malig w/o CC/MCC
- 545 Connective tissue disorders w MCC
- 546 Connective tissue disorders w CC
- 547 Connective tissue disorders w/o CC/MCC
- 548 Septic arthritis w MCC
- 549 Septic arthritis w CC

550 Septic arthritis w/o CC/MCC 551 Medical back problems w MCC 552 Medical back problems w/o MCC Bone diseases & arthropathies w MCC 553 554 Bone diseases & arthropathies w/o MCC 555 Signs & symptoms of musculoskeletal system & conn tissue w MCC 556 Signs & symptoms of musculoskeletal system & conn tissue w/o MCC 557 "Tendonitis, myositis & bursitis w MCC" 558 "Tendonitis, myositis & bursitis w/o MCC" 559 "Aftercare, musculoskeletal system & connective tissue w MCC" 560 "Aftercare, musculoskeletal system & connective tissue w CC" 561 "Aftercare, musculoskeletal system & connective tissue w/o CC/MCC" 562 "Fx, sprn, strn & disl except femur, hip, pelvis & thigh w MCC" "Fx, sprn, strn & disl except femur, hip, pelvis & thigh w/o MCC" 563 Other musculoskeletal sys & connective tissue diagnoses w MCC 564 Other musculoskeletal sys & connective tissue diagnoses w CC 565 566 Other musculoskeletal sys & connective tissue diagnoses w/o CC/MCC 570* Skin debridement w MCC (beginning 10/1/11) 571* Skin debridement w CC (beginning 10/1/11) 572* Skin debridement w/o CC/MCC (beginning 10/1/11) Skin graft &/or debrid for skn ulcer or cellulitis w MCC (until 9/30/11) 573* 573* Skin graft for skin ulcer or cellulitis w MCC (beginning 10/1/11) 574* Skin graft &/or debrid for skn ulcer or cellulitis w CC (until 9/30/11) 574* Skin graft for skin ulcer or cellulitis w CC (beginning 10/1/11) 575* Skin graft &/or debrid for skn ulcer or cellulitis w/o CC/MCĆ (until 9/30/11) 575* Skin graft for skin ulcer or cellulitis w/o CC/MCC (beginning 10/1/11) 576* Skin graft &/or debrid exc for skin ulcer or cellulitis w MCC (until 9/30/11) 576* Skin graft except for skin ulcer or cellulitis w MCC (beginning 10/1/11) 577* Skin graft &/or debrid exc for skin ulcer or cellulitis w CC (until 9/30/11) Skin graft except for skin ulcer or cellulitis w CC (beginning 10/1/11) 577* 578* Skin graft &/or debrid exc for skin ulcer or cellulitis w/o CC/MCC (until 9/30/11) 578* Skin graft except for skin ulcer or cellulitis w/o CC/MCC (beginning 10/1/11) 579 "Other skin, subcut tiss & breast proc w MCC" 580 "Other skin, subcut tiss & breast proc w CC" 581 "Other skin, subcut tiss & breast proc w/o CC/MCC" 582 Mastectomy for malignancy w CC/MCC 583 Mastectomy for malignancy w/o CC/MCC 584 "Breast biopsy, local excision & other breast procedures w CC/MCC" 585 "Breast biopsy, local excision & other breast procedures w/o CC/MCC" 592 Skin ulcers w MCC 593 Skin ulcers w CC 594 Skin ulcers w/o CC/MCC Major skin disorders w MCC 595 596 Major skin disorders w/o MCC 597 Malignant breast disorders w MCC 598 Malignant breast disorders w CC 599 Malignant breast disorders w/o CC/MCC 600 Non-malignant breast disorders w CC/MCC 601 Non-malignant breast disorders w/o CC/MCC Cellulitis w MCC 602 603 Cellulitis w/o MCC 604 "Trauma to the skin, subcut tiss & breast w MCC" 605 "Trauma to the skin, subcut tiss & breast w/o MCC" 606 Minor skin disorders w MCC 607 Minor skin disorders w/o MCC 614 Adrenal & pituitary procedures w CC/MCC 615 Adrenal & pituitary procedures w/o CC/MCC "Amputat of lower limb for endocrine, nutrit, & metabol dis w MCC" 616 617 "Amputat of lower limb for endocrine, nutrit, & metabol dis w CC" "Amputat of lower limb for endocrine, nutrit, & metabol dis w/o CC/MCC" 618 O.R. procedures for obesity w MCC 619

O.R. procedures for obesity w CC

O.R. procedures for obesity w/o CC/MCC

"Skin grafts & wound debrid for endoc, nutrit & metab dis w MCC"

620

621

623 "Skin grafts & wound debrid for endoc, nutrit & metab dis w CC" 624 "Skin grafts & wound debrid for endoc, nutrit & metab dis w/o CC/MCC" 625 "Thyroid, parathyroid & thyroglossal procedures w MCC' 626 "Thyroid, parathyroid & thyroglossal procedures w CC 627 "Thyroid, parathyroid & thyroglossal procedures w/o CC/MCC" 628 "Other endocrine, nutrit & metab O.R. proc w MCC" 629 "Other endocrine, nutrit & metab O.R. proc w CC" 630 "Other endocrine, nutrit & metab O.R. proc w/o CC/MCC" 637 Diabetes w MCC 638 Diabetes w CC 639 Diabetes w/o CC/MCC 640* Nutritional & misc metabolic disorders w MCC (until 9/30/11) 640* Miscellaneous disorders of nutrition, metabolism, and fluids and electrolytes w MCC (beginning 10/1/11) 641* Nutritional & misc metabolic disorders w/o MCC (until 9/30/11) 641* Miscellaneous disorders of nutrition, metabolism, and fluids and electrolytes w/o MCC (beginning 10/1/11) 642* Inborn errors of metabolism (until 9/30/11) 642* Inborn and other disorders of metabolism (beginning 10/1/11) 643 Endocrine disorders w MCC 644 Endocrine disorders w CC 645 Endocrine disorders w/o CC/MCC 652 Kidney transplant 653 Major bladder procedures w MCC 654 Major bladder procedures w CC 655 Major bladder procedures w/o CC/MCC 656 Kidney & ureter procedures for neoplasm w MCC 657 Kidney & ureter procedures for neoplasm w CC 658 Kidney & ureter procedures for neoplasm w/o CC/MCC 659 Kidney & ureter procedures for non-neoplasm w MCC 660 Kidney & ureter procedures for non-neoplasm w CC 661 Kidney & ureter procedures for non-neoplasm w/o CC/MCC Minor bladder procedures w MCC 662 Minor bladder procedures w CC 663 664 Minor bladder procedures w/o CC/MCC 665 Prostatectomy w MCC 666 Prostatectomy w CC Prostatectomy w/o CC/MCC 667 Transurethral procedures w MCC 668 669 Transurethral procedures w CC 670 Transurethral procedures w/o CC/MCC 671 Urethral procedures w CC/MCC 672 Urethral procedures w/o CC/MCC 673 Other kidney & urinary tract procedures w MCC 674 Other kidney & urinary tract procedures w CC 675 Other kidney & urinary tract procedures w/o CC/MCC 682 Renal failure w MCC 683 Renal failure w CC 684 Renal failure w/o CC/MCC 685 Admit for renal dialysis 686 Kidney & urinary tract neoplasms w MCC 687 Kidney & urinary tract neoplasms w CC 688 Kidney & urinary tract neoplasms w/o CC/MCC 689 Kidney & urinary tract infections w MCC 690 Kidney & urinary tract infections w/o MCC 691 Urinary stones w esw lithotripsy w CC/MCC 692 Urinary stones w esw lithotripsy w/o CC/MCC 693 Urinary stones w/o esw lithotripsy w MCC 694 Urinary stones w/o esw lithotripsy w/o MCC 695 Kidney & urinary tract signs & symptoms w MCC 696 Kidney & urinary tract signs & symptoms w/o MCC 697 Urethral stricture 698 Other kidney & urinary tract diagnoses w MCC 699 Other kidney & urinary tract diagnoses w CC

Other kidney & urinary tract diagnoses w/o CC/MCC

- 707 Major male pelvic procedures w CC/MCC
- 708 Major male pelvic procedures w/o CC/MCC
- 709 Penis procedures w CC/MCC
- 710 Penis procedures w/o CC/MCC
- 711 Testes procedures w CC/MCC
- 712 Testes procedures w/o CC/MCC
- 713 Transurethral prostatectomy w CC/MCC
- 714 Transurethral prostatectomy w/o CC/MCC
- Other male reproductive system O.R. proc for malignancy w CC/MCC
- Other male reproductive system O.R. proc for malignancy w/o CC/MCC
- Other male reproductive system O.R. proc exc malignancy w CC/MCC
- Other male reproductive system O.R. proc exc malignancy w/o CC/MCC
- "Malignancy, male reproductive system w MCC"
- "Malignancy, male reproductive system w CC"
- "Malignancy, male reproductive system w/o CC/MCC"
- 725 Benign prostatic hypertrophy w MCC
- Benign prostatic hypertrophy w/o MCC
- 727 Inflammation of the male reproductive system w MCC
- 728 Inflammation of the male reproductive system w/o MCC
- Other male reproductive system diagnoses w CC/MCC
- Other male reproductive system diagnoses w/o CC/MCC
- "Pelvic evisceration, rad hysterectomy & rad vulvectomy w CC/MCC"
- "Pelvic evisceration, rad hysterectomy & rad vulvectomy w/o CC/MCC"
- 736 Uterine & adnexa proc for ovarian or adnexal malignancy w MCC 737 Uterine & adnexa proc for ovarian or adnexal malignancy w CC
- 737 Uterine & adnexa proc for ovarian or adnexal malignancy w CC
 738 Uterine & adnexa proc for ovarian or adnexal malignancy w/o CC/MCC
- "Uterine,adnexa proc for non-ovarian/adnexal malig w MCC"
- 740 "Uterine,adnexa proc for non-ovarian/adnexal malig w CC"
- "Uterine,adnexa proc for non-ovarian/adnexal malig w/o CC/MCC"
- 742 Uterine & adnexa proc for non-malignancy w CC/MCC
- 743 Uterine & adnexa proc for non-malignancy w/o CC/MCC
- "D&C, conization, laparoscopy & tubal interruption w CC/MCC"
- "D&C, conization, laparoscopy & tubal interruption w/o CC/MCC"
- "Vagina, cervix & vulva procedures w CC/MCC"
- "Vagina, cervix & vulva procedures w/o CC/MCC"
- 748 Female reproductive system reconstructive procedures 749 Other female reproductive system O.R. procedures w C
- 749 Other female reproductive system O.R. procedures w CC/MCC 750 Other female reproductive system O.R. procedures w/o CC/MCC
- 754 "Malignancy, female reproductive system w MCC"
- "Malignancy, female reproductive system w CC"
- "Malignancy, female reproductive system w/o CC/MCC"
- 757 "Infections, female reproductive system w MCC"
- 758 "Infections, female reproductive system w CC"
- "Infections, female reproductive system w/o CC/MCC"
- Menstrual & other female reproductive system disorders w CC/MCC
- Menstrual & other female reproductive system disorders w/o CC/MCC
- 765 Cesarean section w CC/MCC
- 766 Cesarean section w/o CC/MCC
- 767 Vaginal delivery w sterilization &/or D&C
- Vaginal delivery w O.R. proc except steril &/or D&C
- Postpartum & post abortion diagnoses w O.R. procedure
- "Abortion w D&C, aspiration curettage or hysterotomy"
- 774 Vaginal delivery w complicating diagnoses
- 775 Vaginal delivery w/o complicating diagnoses
- Postpartum & post abortion diagnoses w/o O.R. procedure
- 777 Ectopic pregnancy
- 778 Threatened abortion
- 779 Abortion w/o D&C
- 780 False labor
- Other antepartum diagnoses w medical complications
- Other antepartum diagnoses w/o medical complications
- 789 "Neonates, died or transferred to another acute care facility"
- 790 "Extreme immaturity or respiratory distress syndrome, neonate"
- 791 Prematurity w major problems

- 792 Prematurity w/o major problems
- Full term neonate w major problems
- Neonate w other significant problems
- 795 Normal newborn
- 799 Splenectomy w MCC
- 800 Splenectomy w CC
- Splenectomy w/o CC/MCC
- Other O.R. proc of the blood & blood forming organs w MCC
- Other O.R. proc of the blood & blood forming organs w CC
- Other O.R. proc of the blood & blood forming organs w/o CC/MCC
- Major hematol/immun diag exc sickle cell crisis & coagul w MCC Major hematol/immun diag exc sickle cell crisis & coagul w CC
- Major hematol/immun diag exc sickle cell crisis & coagul w/o CC/MCC
- Red blood cell disorders w MCC
- Red blood cell disorders w/o MCC
- 813 Coagulation disorders
- Reticuloendothelial & immunity disorders w MCC
- 815 Reticuloendothelial & immunity disorders w CC
- Reticuloendothelial & immunity disorders w/o CC/MCC
- 820 Lymphoma & leukemia w major O.R. procedure w MCC
- Lymphoma & leukemia w major O.R. procedure w CC
- Lymphoma & leukemia w major O.R. procedure w/o CC/MCC
- Lymphoma & non-acute leukemia w other O.R. proc w MCC
- Lymphoma & non-acute leukemia w other O.R. proc w CC
- Lymphoma & non-acute leukemia w other O.R. proc w/o CC/MCC
- Myeloprolif disord or poorly diff neopl w maj O.R. proc w MCC
- Myeloprolif disord or poorly diff neopl w maj O.R. proc w CC
- Myeloprolif disord or poorly diff neopl w maj O.R. proc w/o CC/MCC
- Myeloprolif disord or poorly diff neopl w other O.R. proc w CC/MCC
- Myeloprolif disord or poorly diff neopl w other O.R. proc w/o CC/MCC
- Acute leukemia w/o major O.R. procedure w MCC
- Acute leukemia w/o major O.R. procedure w CC
 Acute leukemia w/o major O.R. procedure w/o CC/MCC
- Chemo w acute leukemia as sdx or w high dose chemo agent w MCC
- Chemo w acute leukemia as sdx w CC or high dose chemo agent
- Chemo w acute leukemia as sdx w/o CC/MCC
- 840 Lymphoma & non-acute leukemia w MCC
- 841 Lymphoma & non-acute leukemia w CC
- Lymphoma & non-acute leukemia w/o CC/MCC
- Other myeloprolif dis or poorly diff neopl diag w MCC
- Other myeloprolif dis or poorly diff neopl diag w CC
- Other myeloprolif dis or poorly diff neopl diag w/o CC/MCC
- Chemotherapy w/o acute leukemia as secondary diagnosis w MCC
- Chemotherapy w/o acute leukemia as secondary diagnosis w CC
- Chemotherapy w/o acute leukemia as secondary diagnosis w/o CC/MCC
- 849 Radiotherapy
- 853 Infectious & parasitic diseases w O.R. procedure w MCC
- Infectious & parasitic diseases w O.R. procedure w CC
- 855 Infectious & parasitic diseases w O.R. procedure w/o CC/MCC
- Postoperative or post-traumatic infections w O.R. proc w MCC
- Postoperative or post-traumatic infections w O.R. proc w CC
- Postoperative or post-traumatic infections w O.R. proc w/o CC/MCC
- Postoperative & post-traumatic infections w MCC
- Postoperative & post-traumatic infections w/o MCC
- 864 Fever
- Viral illness w MCC
- Viral illness w/o MCC
- Other infectious & parasitic diseases diagnoses w MCC
- Other infectious & parasitic diseases diagnoses w CC
- Other infectious & parasitic diseases diagnoses w/o CC/MCC
- 870 Septicemia or severe sepsis w MV 96+ hours
- Septicemia or severe sepsis w/o MV 96+ hours w MCC
- Septicemia or severe sepsis w/o MV 96+ hours w/o MCC
- O.R. procedure w principal diagnoses of mental illness

880 Acute adjustment reaction & psychosocial dysfunction 881 Depressive neuroses 882 Neuroses except depressive 883 Disorders of personality & impulse control 884 Organic disturbances & mental retardation 885 **Psychoses** 886 Behavioral & developmental disorders 887 Other mental disorder diagnoses 894 "Alcohol/drug abuse or dependence, left AMA" 895 Alcohol/drug abuse or dependence w rehabilitation therapy 896 Alcohol/drug abuse or dependence w/o rehabilitation therapy w MCC 897 Alcohol/drug abuse or dependence w/o rehabilitation therapy w/o MCC 901 Wound debridements for injuries w MCC 902 Wound debridements for injuries w CC 903 Wound debridements for injuries w/o CC/MCC 904 Skin grafts for injuries w CC/MCC 905 Skin grafts for injuries w/o CC/MCC 906 Hand procedures for injuries 907 Other O.R. procedures for injuries w MCC 908 Other O.R. procedures for injuries w CC 909 Other O.R. procedures for injuries w/o CC/MCC 913 Traumatic injury w MCC 914 Traumatic injury w/o MCC 915 Allergic reactions w MCC 916 Allergic reactions w/o MCC 917 Poisoning & toxic effects of drugs w MCC 918 Poisoning & toxic effects of drugs w/o MCC 919 Complications of treatment w MCC 920 Complications of treatment w CC 921 Complications of treatment w/o CC/MCC "Other injury, poisoning & toxic effect diag w MCC"
"Other injury, poisoning & toxic effect diag w/o MCC" 922 923 Extensive burns or full thickness burns w MV 96+ hrs w skin graft 927 928 Full thickness burn w skin graft or inhal inj w CC/MCC 929 Full thickness burn w skin graft or inhal inj w/o CC/MCC 933 Extensive burns or full thickness burns w MV 96+ hrs w/o skin graft 934 Full thickness burn w/o skin grft or inhal inj 935 Non-extensive burns O.R. proc w diagnoses of other contact w health services w MCC 939 940 O.R. proc w diagnoses of other contact w health services w CC 941 O.R. proc w diagnoses of other contact w health services w/o CC/MCC 945 Rehabilitation w CC/MCC 946 Rehabilitation w/o CC/MCC 947 Signs & symptoms w MCC 948 Signs & symptoms w/o MCC 949 Aftercare w CC/MCC 950 Aftercare w/o CC/MCC 951 Other factors influencing health status 955 Craniotomy for multiple significant trauma 956 "Limb reattachment, hip & femur proc for multiple significant trauma" Other O.R. procedures for multiple significant trauma w MCC 957 958 Other O.R. procedures for multiple significant trauma w CC 959 Other O.R. procedures for multiple significant trauma w/o CC/MCC 963 Other multiple significant trauma w MCC 964 Other multiple significant trauma w CC 965 Other multiple significant trauma w/o CC/MCC 969 HIV w extensive O.R. procedure w MCC 970 HIV w extensive O.R. procedure w/o MCC 974 HIV w major related condition w MCC 975 HIV w major related condition w CC 976 HIV w major related condition w/o CC/MCC 977 HIV w or w/o other related condition

Extensive O.R. procedure unrelated to principal diagnosis w MCC

Extensive O.R. procedure unrelated to principal diagnosis w CC

981

983 Extensive O.R. procedure unrelated to principal diagnosis w/o CC/MCC 984 Prostatic O.R. procedure unrelated to principal diagnosis w MCC 985 Prostatic O.R. procedure unrelated to principal diagnosis w CC 986 Prostatic O.R. procedure unrelated to principal diagnosis w/o CC/MCC 987 Non-extensive O.R. proc unrelated to principal diagnosis w MCC 988 Non-extensive O.R. proc unrelated to principal diagnosis w CC Non-extensive O.R. proc unrelated to principal diagnosis w/o CC/MCC 989 998 Principal diagnosis invalid as discharge diagnosis 999 Ungroupable

MS-DRGs 998 and 999 contain cases that could not be assigned to valid DRGs.

Medicare Severity-Major Diagnosis Category (MS-MDC)*

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0 = Ungroupable
 1 = Nervous System
 2 = Eye
 3 = Ear, Nose, Mouth & Throat
 4 = Respiratory System
 5 = Circulatory System
 6 = Digestive System
 7 = Hepatobiliary System & Pancreas
 8 = Musculoskeletal System & Connective Tissue
 9 = Skin, Subcutaneous Tissue & Breast
10 = Endocrine, Nutritional & Metabolic System
11 = Kidney & Urinary Tract
12 = Male Reproductive System
13 = Female Reproductive System
14 = Pregnancy, Childbirth & the Puerperium
15 = Newborn & Other Neonates (Perinatal Period)
16 = Blood and Blood-Forming Disorders
17 = Myeloproliferative DDs (Diff Neoplasms)
18 = Infectious and Parasitic Dds
19 = Mental Diseases and Disorders
20 = Alcohol/Drug Use or Induced Mental Disorders
21 = Injuries, Poisoning and Toxic Effect of Drugs
22 = Burns
23 = Factors Influencing Health Status
24 = Multiple Significant Trauma
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25 = Human Immunodeficiency Virus Infection

*Patients having heart, liver, lung, simultaneous pancreas/kidney, pancreas, or bone marrow transplants, or tracheostomies, traditionally categorized as PRE MDC (0), are assigned by the DRG Grouper into the following MS-DRGs independent of the MDC of the principal diagnosis: 001-013, 984-989. MS-DRGs (981-983,998,999) associated with all MDCs are assigned independent of the MDC of the principal diagnosis if the diagnosis is valid. Otherwise, this is the traditional Health Care Financing Administration (HCFA) MDC.

APPENDIX A

UTAH HOSPITAL (WITH EMERGENCY DEPARTMENTS) PROFILE

HOSPITAL CHARACTERISTICS: ED REPORT 2012

ID ¹	HOSPITAL NAME	OWN ²	AFFILIATION	COUNTY	CITY	U/R³	TEACH⁴	# ED BEDS
118	Alta View Hospital	N	Intermountain Healthcare	Salt Lake	Sandy	U	N	17
136	American Fork Hospital	N	Intermountain Healthcare	Utah	American Fork	U	N	11
134	Ashley Regional Medical Center	I	LifePoint Hospitals, Inc.	Jintah	Vernal	R	N	5
104	Bear River Valley Hospital	N	Intermountain Healthcare	Box Elder	Tremonton	R	N	3
101	Beaver Valley Hospital	G	Freestanding	Beaver	Beaver	R	N	2
103	Brigham City Community Hospital	ı	MountainStar Healthcare	Box Elder	Brigham City	R	N	5
145	Cache Valley Specialty Hospital⁵	ı	National Surgical Hospitals	Cache	North Logan	R	N	2
106	Castleview Hospital	I	LifePoint Hospitals, Inc.	Carbon	Price	R	N	9
113	Central Valley Medical Center	N	Rural Health Mgmt	Juab	Nephi	R	N	5
119	Cottonwood Hospital Medical Center ⁶	N	Intermountain Healthcare	Salt Lake	Murray	U	N	18
108	Davis Hospital and Medical Center	ı	IASIS Health Care	Davis	Layton	U	N	21
116	Delta Community Medical Center	N	Intermountain Healthcare	Millard	Delta	R	N	6
140	Dixie Regional Medical Center	N	Intermountain Healthcare	Washington	St. George	R	N	12
115	Fillmore Community Medical Center	N	Intermountain Healthcare	Millard	Fillmore	R	N	3
110	Garfield Memorial Hospital	N	Intermountain Healthcare	Garfield	Panguitch	R	N	2
129	Gunnison Valley Hospital	G	Freestanding	Sanpete	Gunnison	R	N	3
139	Heber Valley Medical Center	N	Intermountain Healthcare	Wasatch	Heber	R	N	5
146	ntermountain Medical Center	N	Intermountain Healthcare	Salt Lake	Murray	U	Y	76

ID¹	HOSPITAL NAME	OWN ²	AFFILIATION	COUNTY	CITY	U/R³	TEACH⁴	# ED BEDS
117	Jordan Valley Medical Center	I	IASIS Health Care	Salt Lake	West Jordan	U	N	10
114	Kane County Hospital	G	Freestanding	Kane	Kanab	R	N	1
107	Lakeview Hospital	I	MountainStar Healthcare	Davis	Bountiful	U	N	11
121	DS Hospital	N	Intermountain Healthcare	Salt Lake	Salt Lake City	U	Υ	24
724	Lone Peak Emergency Center⁵	ı	MountainStar Healthcare	Salt Lake	Draper	U	N	10
105	ogan Regional Hospital	N	Intermountain Healthcare	Cache	Logan	R	N	16
141	McKay-Dee Hospital	N	Intermountain Healthcare	Weber	Ogden	U	Υ	23
102	Milford Valley Memorial Hospital	G	Freestanding	Beaver	Milford	R	N	1
111	Moab Regional Hospital	G	Rural Health Mgmt	Grand	Moab	R	N	3
137	Mountain View Hospital	ı	MountainStar Healthcare	Utah	Payson	U	N	11
133	Mountain West Medical Center	G	Community Health Syst.	Tooele	Tooele	R	N	8
142	Ogden Regional Medical Center	ı	MountainStar Healthcare	Weber	Ogden	U	N	17
135	Orem Community Hospital	N	ntermountain Healthcare	Utah	Orem	U	N	9
147	Park City Medical Center	N	ntermountain Healthcare	Summit	Park City	R	N	15
126	Pioneer Valley Hospital	I	ASIS Health Care	Salt Lake	West Valley	U	Y	18
122	Primary Children's Medical Center	N	ntermountain Healthcare	Salt Lake	Salt Lake City	U	N	35
148	Riverton Hospital	N	Intermountain Healthcare	Salt Lake	Riverton	U	Y	20
120	Salt Lake Regional Medical Center	ı	ASIS Health Care	Salt Lake	Salt Lake City	U	Y	17
128	San Juan Hospital	G	Management	San Juan	Monticello	R	N	6
130	Sanpete Valley Hospital	N	ntermountain Healthcare	Sanpete	Mt. Pleasant	R	N	3
132	Sevier Valley Hospital	N	ntermountain Healthcare	Sevier	Richfield	R	N	3
124	St. Mark's Hospital	I	MountainStar Healthcare	Salt Lake	Salt Lake City	U	Y	21
307	The Orthopedic Specialty Hospital⁵	ı	Intermountain Healthcare	Salt Lake	Salt Lake City	U	N	0

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144	Timpanogos Regional Hospital	I	MountainStar Healthcare	Utah	Orem	U	N	6
109	Uintah Basin Medical Center	G	Freestanding	Duchesne	Roosevelt	R	N	7
502	UHC Daybreak Health Center ER⁵	G	University Healthcare	Salt Lake	South Jordan	U	Y	12
310	UHC Huntsman Cancer Institute⁵	G	University Healthcare	Salt Lake	Salt Lake City	U	Y	0
125	UHC University of Utah Hospital	G	University Healthcare	Salt Lake	Salt Lake City	U	Y	28
138	Utah Valley Regional Medical Center	N	ntermountain Healthcare	Utah	Provo	U	N	20
112	Valley View Medical Center	N	ntermountain Healthcare	Iron	Cedar City	R	N	7

¹Hospital ID number. See page 8 for hospital list in numerical order.

Note: In previous reports the hospitals with addresses, phone numbers, and number of beds in the above list, can be obtained as a "cut and paste" document from the website http://health.utah.gov/hda/usersupport.php and click on "List of data providers".

An alternative source for a list of Utah hospitals is the Utah Department of Health Website http://health.utah.gov/hflcra and click on "Facility Info", "Alphabetical Listing" and the appropriate facility type.

²Owner category: G=Government, N=Not for Profit, I=Investor-Owned.

³Urban or Rural location of hospital.

⁴Teaching hospital (Yes or No).

The Orthopedic Specialty Hospital is only included with the ER-Inpatient admissions in 2003 only, UHC Huntsman Cancer Institute is ER Inpatient only, Cache Valley Hospital is ER Outpatient only, Lone Peak Emergency Center is ER Outpatient only, UHC Daybreak Health Center ER is ER Outpatient only.

⁶Cottonwood Hospital Closed October 2007